INTEGRATION STUDY.

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INTEGRATION STUDY

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I. THE RELATIONSHIP BETWEEN SELF-CONCEPT, INDEPENDENCE AND THE LIFE STYLES OF CONGENITALLY BLIND PERSONS IN TERMS OF INTEGRATION

The problem in this study is to determine the ways in which self-concept and independence relate to the participation of blind persons in community life. It addresses the following four questions:

1. What are the dominant modes of self-perception of the subjects under study?
2. To what extent are the subjects independent?
3. To what extent are the subjects integrated?
4. What are the relationships between the subjects' self-perceptions, independence and integration?

Background

One of the basic needs of all human beings is a sense of belonging, a feeling of worth, of acceptance by others as a member of the human family. Not until modern times has this need by blind people begun to be fulfilled. In ancient times, they were feared, pitied, shunned, ignored, even abandoned to the elements to perish. They were considered unfit to cope with life's exigencies or to be capable, of contributing to society.

With the advent of the Judeo-Christian era, blind people were protected, allowed to live out their lives as wards of society, depending on alms and religious charity. Throughout the Middle Ages, remaining a class apart, they begged for a livelihood, often forming brotherhoods, similar to guilds, under the protection of the Church or Crown. Now and then, across the centuries, blind individuals of talent and intelligence, or those with the good fortune of family status, managed to transcend the lack of access to education, and earned reputations as scientists, mathematicians, engineers, writers, and musicians.

With the founding of the first school for the blind by Valentin Hauy in 1784 and the completion of a system of reading and writing by Louis Braille in 1834, education was finally available for blind people (Lowenfeld 1975).

Education

Of all handicapped children, the blind were among the first to be admitted to day schools. The first Braille class for blind children was established in Chicago in 1900 through the efforts of John Curtis, Edward Nolan (both blind), and Frank H. Hall. Many such classes were subsequently added throughout the country. Yet, by 1949 ninety percent of American blind children were still attending residential schools.

Between 1945 and 1954 the incidence of retrolental fibroplasia (RLF) (1) quadrupled blindness among children in the U.S., drawing the attention of educators and workers in the field to a reassessment of the values of integrated as opposed to segregated education of the blind. Lowenfeld describes the situation thus:

> Undoubtedly the same forces that produced changes in residential schools are contributing factors - the recognition of the importance of family life and the general trend toward integration. The main impetus, though, came from the thousands of parents of RLF children who could not see a valid reason why their child should be separated from his family and enrolled in a residential school often far away....The parent's influence was not the sole factor. The communities themselves, from grass-roots to school administrators, had become aware of their responsibility to provide education for all children including those who are handicapped (Lowenfeld, 1975, page 110).

In the following table, the columns indicate the change in school enrollment of blind children between the years 1950 and 1978.

Year	Total Number Blind Children Attending School	Total Number Blind Children in Residential Schools	%	Total Number in Day School	%
1950	5,670	5,014	88.0	636	12.0
1978	29,488	7,052	24.0	22,436	76.0

In 1858 the U.S. Government established the American Printing House for the Blind in Louisville, Kentucky, to provide textbooks, maps, and other necessary materials, first for the residential schools and later for the elementary and high school classes in the day schools.

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(1) A condition resulting from the administration of an excess of oxygen to premature infants, often causing blindness and secondary handicaps.

In 1907 blind college students became eligible for paid reader services.
The Pratt-Smoot Act of 1931 provided library services originating in the
Library of Congress and distributed by branch libraries throughout the
United States. Recorded books on discs and tapes were later added to
Braille material. Numerous grants for teacher preparation were awarded
in the 1960's (Lowenfeld 1975).

The climax in educational opportunity for the blind came with the
passage of Public Law 94-142, the Education for All Handicapped
Children Act of 1975, compelling the "mainstreaming" of all handicapped
children into regular classes and requiring an Individual Education Plan
as well as placement in the "least restrictive environment" for each
student. In pamphlets to teachers, guidelines focused attention on
the skills in the activities of daily living, instruction in the use
of the white cane, interaction with sighted peers, and ongoing parent
involvement (Calovini 1977, Jones 1968).

Employment

One of the major sources of separation of the blind from society
has been in the area of employment. The Diderot Letter on the blind (1749)
and the writings and lectures of residential school pioneers like Klein
in Vienna and Howe in Boston in the 19th century, drew attention to blind
people's potential for manual work. Beginning in the residential schools,
vocational opportunities in sheltered environments continued and spread
well into the 20th century.

In an industrialized society, work has to do with status, security,
and power. "Work," says Peter Drucker (1973), "is embedded in man's
life, in his emotions, in his existence in society, community, and in
his relation to himself. It is one of the ways a person defines himself,
measures his worth and humanity. It is an extension of his personality....
We live in an employee society" (page 92).

But where have blind people been in the world of work? Certainly
not in the "employee society." Not until the past decade did they
begin to emerge from vocational isolation. True, World War II provided
impetus to their greater admission to industrial jobs - assembly,
drill and punch press, riveting, winding, grinding, sorting, packing,

sewing - particularly in the ship and plane building factories. The labor market was tight. Some blinded veterans returning home as heroes were able to resume jobs held before impairment; others required retraining.

The Barden LaFollette Act of 1943 provided diagnostic services, physical restoration, vocational counseling, training, and job placement for the handicapped under the auspices of the Department of Rehabilitation. More recent legislation (1973 and 1978) reinforced and expanded this legislation. However, the great majority of the blind were encrusted in sheltered workshops (1), engaged in broom making, basketry, chair caning, and in stereotyped jobs, such as dictaphone transcribers, darkroom technicians, and vending stand operators (Lowenfeld 1975).

Technology

The American Foundation for the Blind is a pioneer in the development of adaptive aids and appliances used in the home, at school, and at work - Braille watches, measuring gauges, raised line drawings, etc. With the steady increase of demands by the blind for entrance into the competitive labor market, other institutions, such as MIT, Bell Telephone, and the Sensory Aids Foundation, have become active in intensified research to find solutions to vocational exclusion due to dependence on vision. The resultant explosion of technology in the 70's has effected dramatic changes in job opportunities for the blind. The application of radar and transistors (through audible signs and tactile markings) to mobility aids, such as the laser cane and sonic guide, makes travel safer and more relaxed, and by enlarging the scope of detection, gives the blind greater control of their environment. The light probe enables the blind to work as telephone switchboard operators. The Optacon (which converts print letters into tactile vibrations), the Kurzweil Reading Machine (print into speech), paperless Braille (taped material into Braille), the talking calculator, and now, "talking lights," which read signs - all these are opening up jobs in banks, insurance companies, radio traffic coordination, office management, research. By thus reducing

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(1) Shops mainly under agency auspices where blind people work for less than the minimum wage, often for most of their working years.

the limitations of blindness, technology is greatly widening access to
the "employee society," and through work into the mainstream of community
life. The blind are employed today as information specialists, computer
programmers, quality control inspectors, word processing operators,
systems analysts, chemists (Rossi and Marotta 1974).

Upgrading of Agency Services

Responding to a long-time need for improving the quality of
services and establishing standards for agencies serving the blind,
the American Foundation for the Blind in 1967 spearheaded the formation
of the National Accreditation Council, N.A.C., composed of blind as
well as seeing directors. Some of the criteria for accreditation are
professional staffing (including instructors in mobility and activities
of daily living), accountability, personnel policies, consumer involvement (1),
rights (such as prompt service, privacy, and grievance procedures), and
operation not as asylums, but as gateways to the seeing world. Since
the establishment of N.A.C., increasing numbers of agencies across
the country have gradually improved their mode of operation, programs,
and goals. "In the ten years since its inception, ninety-three agencies
have applied to N.A.C. for accreditation. Seventy-eight have been accredited,
four are in deferred status, and seven have been denied" (Washington
Report, American Foundation for the Blind, August 1979).

Public Education

A proliferation of stories in newspapers (San Francisco Chronicle,
October 4,5,6,8, 1976; Wall Street Journal, August 1976 and October 1976;
U.S. News and World Report, June 11, 1979) and programs on commercial
and public television ("Little House on the Prairie," an episode dealing
with a family's blind daughter; "Ice Castles," a movie about a blind
skater; "Sixty Minutes," a special television report on sheltered
workshops) indicate the ways public consciousness is being raised.

Many organizations for the blind circulate newsletters, hold
employer seminars, keep radio and television stations supplied
with public service announcements, provide speakers for clubs, schools,

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(1) The Rehabilitation Act of 1973 mandates the participation of
the client in his/her rehabilitation plan and in the decision-making
process.

civic and service groups, disseminate educational pamphlets, and maintain by phone, mail, and in person, information, referral, and consultative services.

Legislation

Most of the beneficial legislation for the blind has occurred through their own efforts. National organizations, such as the American Foundation for the Blind, the American Association of Workers for the Blind, the American Association of Instructors of the Blind, the National Federation of the Blind and the American Council of the Blind have in the past, through lobbies, use of the courts and other official hearings, personal intervention, and letters to senators and representatives, implemented such legislation as: the Wagner-O'Day Act, 1938, establishing the National Industries for the Blind as a clearing house to manage blind-made products (brushes, pot holders, soap, electronic parts) and to sell to the government; income tax deductions by reason of blindness; gradual admission to city, state, and federal civil service jobs; employment of teachers in the public schools strictly on the basis of merit; the White Cane Law giving the right of way to blind pedestrians; elimination of the Means Test, requiring relatives to assume support; and much other ameliorative legislation (Lowenfeld 1975). Action in the field of social services and research, a new thrust, reveals the continuing impact of public policy affecting all the handicapped. The Rehabilitation Act of 1978 authorized, as part of the responsibility of the Department of Rehabilitation, the provision of training in the area of independent living; it also provided funding for the establishment of a National Institute of Research for the Handicapped, the latter to deal with the needs of all the handicapped, not just the working handicapped. Public Law 95-602 and recent amendments to the Comprehensive Employment Training Act emphasize jobs for the handicapped in the public and private sectors. Thus public policy increasingly reflects positive action.

Consumer Coalition Movement

What has been seen in the 70's, however, is an even larger, still more aggressive movement on the part of all the handicapped - a grassroots movement of disabled people of every age and walk of life determined finally to be granted every right and opportunity available to non-handicapped Americans. They want not only to be respected, but strongly affirmed as human beings of dignity and value. Perhaps the most vivid evidence of this joining together of forces in a common cause was the sit-ins by the handicapped across the country demanding, four years after its enactment, the signing of the Rehabilitation Act of 1973, sections 503 and 504, prohibiting discrimination and mandating equal opportunity for the handicapped in employment, education, housing, and transportation. Together the blind, the deaf, the paraplegic accomplished their mission.

To concentrate and strengthen their power, twenty-four membership groups (for the blind), six professional organizations, five state agencies and schools for the blind, and eighteen agencies and service organizations for other handicapped joined to form ALL (Affiliated Leadership League). According to its chairman, Robert McLean (1979), its objective in 1979 was "positive support for advocacy and national and local legislation that would better involve the consumer in the process of delivery services to the blind, and increase the role of the consumer not just in strictly advisory capacities, but toward the level of affecting policy in a more direct way" (Editorial).

II. REVIEW OF RELATED LITERATURE

Research

Because vision plays such a dominant part in the physical, cognitive, and social activities of men, it is generally regarded as the most important of human senses (Lowenfeld 1975). Blind people themselves, however, consider deafness, paralysis, double amputation, mental disorders, epilepsy, or invalidism far worse than blindness (Monbeck 1973). Children blind from birth or early childhood have no sense of loss, as do those who become blind later in life (Cohen 1966).

The research on blindness is fraught with many problems. In dealing with the blind as a group, several caveats must be observed. First, the term "blind" may refer to a loss of vision varying from light perception only, to travel vision, or, with magnification, reading vision. Partially sighted and totally blind people vary significantly in life experiences. Sightedness is related to participation in the labor force (Feinman 1979), to social activity (Josephson 1968), to independence (Lukoff and Whiteman 1970), and to perceived happiness (Feinman 1979). Second, the age of onset of blindness is critical in determining the physical, psychological, and social experiences of adjustment (Bauman 1954, Lukoff and Whiteman 1970, Connor and Muldoon 1973). Third, segregated settings as opposed to family and home environments can affect the attitudes and social behavior of blind individuals (Chevigny and Braverman 1950, Cutsforth 1950, Carroll 1961, Josephson 1968, Scott 1969). Most of the studies reviewed used subjects in segregated settings.

Cowen et al. (1961) point out that "a variety of attitudes have been examined through literature, culture, legislation, and personal opinions. Many of the writers deal with the problem on a speculative or observational basis and very few have attempted to provide data which is quantifiable" (page 26).

In research on social participation, Bauman (1954) states:

> With emphasis on the cybernetic system, you lose all sense of actual groups of living human beings and reality, and the cognitive world is more and more abstracted from

actuality - the institution, agency, organization,
bureau, neighborhood, family - each reduced in a cybernetic
system with the individual leeched away. What a
diminishing of men, of all men, and particularly of men
who are blind....Inevitably blindness involves value
judgements for the blind and for those around them
both externally and at the core of self....Adjustment is
also related to self-image, both actual and telic (page 133).

At a later date, also referring to the problems of research on
blindness, Scholl (1974) comments:

There is relatively little definitive research
concerning the effects of blindness on the develop-
mental processes. This situation is understandable
in the light of the small numbers of visually handi-
capped, particularly in the age group infancy to
adulthood, an extremely diverse and heterogeneous
population which makes generalizations difficult, and
the wide geographical distribution of the blind which
complicates sampling procedures. Much of what is known
and accepted, therefore, is based on observation and
descriptive studies (page 1).

Adjustment - Societal Attitudes; the Blind as a Group

The writings surveyed fall into two categories - one dealing with
the adjustment of the blind as a group, the other concerned with the
developmental aspects of blind people as individuals. Blindness is
an emotionally charged word causing reactions that persist despite
rational arguments and demonstrated facts. As early as 1934, Mead
observed that man responds to himself as others respond to him. An
extensive literature has developed around the phenomenon of internalization
and reflection by the blind of society's attitudes toward them (Cutsforth
1950, Chevigny 1950, Gowman 1957, Josephson 1968, Scott 1969, Lukoff
and Whiteman 1970, Goffman 1974, Monbeck 1973, Connor and Muldoon 1973).

Lowenfeld (1975) defines attitudes as "relatively stable sets of
emotional reactions to objects" and points out that when the objects
are minorities, such as the blind, "the reactions are induced not by
what they are but by what they are perceived to be" (page 242). He
distinguishes four common attitudes toward the blind:

pity: perceiving the blind as helpless and unhappy

fear: based on identification - "How frightful if I were blind"

guilt: the recognition of one's failure to lend assistance to
a blind person or group; association with such thoughts
as "Why is he blind while I am not," or "There but for
the grace of God go I"

discomfort or uneasiness: reluctance to enter situations or
relationships with a blind person because of apprehension
or anxiety - not knowing quite how to act, or what to do.

Positive attitudes include sympathy, understanding, respect for achieve-
ment and personal liking (Lowenfeld 1975).

The presence of both positive and negative reactions creates an
ambivalence and variability of behavior toward blind people.

> It is apparent that in both the cognitive and affective
> spheres, conflicting forces abound, those on the one
> hand that limit the perceived abilities of blind
> people and are affectively negative, and those that
> support or enhance the abilities of blind people and
> are affectively positive. Thus, both the cognitive
> and affective components of attitudes toward blind
> people potentially play a role in creating ambivalent
> attitudes (Wright, 1974, page 114).

The blind also experience a "spread phenomenon," the extension
of the disability to hearing, general health, emotional maturity, etc.
This tendency inevitably underrates and demeans blind people (Wright 1960).

In all these attitudes one idea prevails - that such feelings and
reactions apply to all persons as a homogeneous group, rather than a
set of individuals who share only the fact of blindness. Wright (1974)
distinguishes between attitudes toward blindness and blind people:

> There is a great difference between attitudes toward blindness
> and blind people. Only when the focus is on blind people
> do positive attitudes emerge (page 114).

One must add to any discussion of stereotypical attitudes that in
most instances these are altered or eliminated when the encounters are
frequent enough so that the sighted person becomes familiar with the
blind person (Monbeck 1973).

From interviews with clients of agencies for the blind, Scott (1969)
theorized that "blindness is a social role which people who do not see

must learn how to play (page iv.). He traces this to "learning the
behavior patterns and attitudes associated with blindness in organiza-
tions established to help the blind." He further states:

> Blindness is a stigma that carries with it a series
> of moral imputations about character and personality.
> This fact leads normal people to regard the blind as
> physical, psychological, moral, and emotional inferiors.
> Blindness is therefore a trait that discredits a man by
> spoiling his identity and respectability (page 92).

On this point Lowenfeld (1975) comments:

> Scott considers the effects of the influence of
> society's notions in a more universal way (than
> Chevigny) with the result that all blind persons
> accept the defeatist notions in the agency's system
> if they come under its influence....Here Scott errs.
> His error is due to his underestimation of the number
> of independent blind and to a lack of appreciation
> of the variety of human reactions and the strength
> of human character. He reports that his findings are
> based, besides interviews with professional workers
> and observation of agency activities, on interviews
> with about 100 blind people of whom only six belonged
> to the category of the independent blind....The six
> cannot possibly have given him a clear appreciation
> the beliefs, attitudes, and adjustments of the hundreds
> of blind teachers, the hundreds of blind lawyers, the
> hundreds of blind computer experts, and the hundreds
> of blind independent businessmen, to name only a few
> of occupations in which we know hundreds of blind
> people to be engaged (page 291).

Gowman's analysis of society's attitudes toward the blind are
also based on role theory and on special situations developed largely
from the feelings and reactions of others like himself adventitiously
blinded in war:

> Society often requires the blind to play the role of
> mourner or sufferer....The blind have the tendency
> to play the role into which society has cast them,
> leaving a mark on many as passive, dependent individuals,
> reinforcing the attitude which produced such behavior....
> The social world of the blind, unlike that of other

groupings, is fraught with conflict. They must cope
with acceptance or rejection, over-evaluation or de-
valuation. Insecurity becomes a prominent feature
of the life routine. Acceptance itself becomes
problematical (1957, page 57).

However, he did find that:

The more actively-oriented blind have rejected the
partial security to be found in society's stereo-
typical definition of their status and have struck
out in search of roles customarily locked into the
dominant status structure (page 62).

With some deviations in their findings, Lukoff and Whiteman (1970)
interviewed 498 legally blind (1) persons in New York State to in-
vestigate the source of their adaptive patterns and to determine
whether or not they constitute "a viable group with its own form and
structure." Using four dimensions - employment, travel, eating, and
shopping skills - along a continuum of dependence/independence, the
authors concluded that the self-definition of the blind was determined
by the "perceived expectations" of the sighted persons they encountered
in those activities examined, that "blindness belongs to the class
of roles for which there are no uniform prescriptions shared by large
numbers of persons, that it involves congeries of attitudes and
emotions, and that attitudes are not uniform." They believe that:

....neither the tendency for sighted persons to
demonstrate stereotyped attitudes toward the
blind nor unfavorable self-concept were signifi-
cantly related to social role performance. Nor
does a survey of the literature reveal such demon-
strated relationships. Findings are consistent with
the thesis that environmental orientation influences
role performance only when the behavior of the
recipient and the orientations of the milieu share
a common value perspective (pp. 241-252).

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(1) Legal blindness is defined as central visual acuity of 20/200
or less in the better eye, with corrective lenses, or central visual
acuity of more than 20/200 if the peripheral field is restricted to a
diameter of 20 degrees or less.

Adjustment - Developmental Aspects; the Blind as Individuals

In the writings reviewed thus far, blind people, as individuals, have been virtually anonymous. What went on within the person, the self, was regarded essentially as a reactive process, a self functioning as a role, reflecting demeaning or at best limiting attitudes of society. Such a role reduced the status of the blind individual to that of social cipher, with influences on his actions or interactions, such as they might be, coming from outside himself.

With the advent of the '70s, the potential of the individual to affect his/her adjustment and self-development drew new attention. The impact of personal experience and endowment, and the value of specialized training aimed at social acceptance, are seen as viable mitigations of societal attitudes and possible facilitators of integration.

In distinguishing between negative and positive ways of adjustment, Wright (1974) suggests:

> ....The succumbing framework notes only difficulties in the life of a blind person and elaborates on their dire consequences. The coping framework, on the other hand, regards problems in terms of how a person with a disability can share in life's satisfactions by being an active participant in the solution of problems and by engaging in a range of activities (page 115).

Thomas Cutsforth, a psychologist, graduate of the Oregon School for the Blind, was one of the first to speak out vehemently against segregated education of the blind and to place squarely upon the individual the responsibility to reject, defy, or in other ways overcome prejudice or demeaning treatment and, by his own resources, find a meaningful and productive life. He writes:

> Until recently the blind and those interested in them have insisted that society revise and modify its attitudes toward this specific group. Obviously, for many reasons, this is an impossibility. In the first place, society has formulated its emotional attitudes, not toward blindness, but toward the reaction patterns of the blind toward themselves and their own condition. Second, it is extremely doubtful whether the degree of emotional and social adaptability of the blind would long support and

sustain any social change of attitude, if it were
possible to achieve it....If there is to be any
solution to the pattern of frustration, the respon-
sibility must be assumed by the blind person himself
as an individual and not as a member of a group....
Many individuals have found this pattern for them-
selves, and when they have found it, they have made
the joyous discovery that the condition of blindness
is the least important thing about themselves and
that it is of no importance at all to others. Then
and only then can they set about the task of living
objectively (1950, page 176).

A. Parental Attitudes

Among the influences experienced by the individual, few are more
important than the attitudes in the home. "Parental attitudes,"
Sommers (1944) writes, constitute the most significant factors in
setting the fundamental habit patterns of the blind child. It is by
the parental relations with the blind child that his personality is
conditioned, and it is not the lack of sight that handicaps the child
as much as it is the fears, frustrations, and deprivations that parental
practices and attitudes inflict upon them" (page 105). Similarly,
Norris (1956) states:

    Blindness in and of itself is not the determining
    factor in a child's development. Rather it is
    failure on the part of adults to know what to expect
    of a blind child or how to encourage his optimal
    development that creates the problem....all too
    frequently his development is tragically warped and
    restricted because of the tendency to assume that
    the limited functioning is a necessary and inevitable
    result of his physical handicap (page 263).

Also affirming home influences and their effect on self-perception,
Langley (1961) notes:

    The child who constantly hears "Don't do that" from
    his parents is likely to develop many anxieties. He
    may develop into a shy, introverted individual....He
    may even retreat into a world of fantasy to compensate
    for the real experience denied him....On the other
    hand, the child who is properly encouraged, yet reason-
    ably shown his limitations, will emerge self-assured,
    well adjusted. He is likely to pursue his private

and public life with positive agility, and will probably find success in both spheres (page 80).

B. Intelligence and Personality

In her report on a longitudinal study conducted for the Department of Rehabilitation under Health, Education and Welfare, Bauman (1954) concludes:

> No quality of vision, education, family, or social interaction has so much to do with adjustment as have the qualities measured by the intelligence quotient and personality inventory scores (page 133).

In a discussion of the relationship between sensory deficit and affective-cognitive development, Klein (1970) makes a perceptive comment:

> Blindness is to be understood less in terms of the visual loss than in terms of the manner of organizing the information provided by the residual modalities. These organizing rules of personality and cognitive styles do not reside in the workings of the retina nor in the corresponding cortical centers of these modalities; rather, the effects of blindness are more likely determined by structural properties of ego-control that transcend channels of sensory input and impose their organizational rules on information provided by the intact modalities (page 319).

C. Socialization

For the achievement of social acceptance, a number of writers stress the blind individual's need for physical and social training. Nathalie Barraga (1976) states: "Habilitation and rehabilitation begin at birth and continue till death. Perhaps educators need to define long-range goals for each individual....Interpersonal relationships or achieving a sense of responsibility may be far more important than grades or subject matter. Some graduate without the experience of shopping for food or clothing. These should be a part of their education. A gap exists between rehabilitation agencies and school. Education must focus more on the student's personality, attitudes toward himself and others, mental health, and interpersonal relationships" (page 92).

In a different approach to achieving social integration, several writers have addressed themselves to the modification or elimination of those behaviors, particularly of the congenitally blind - body language, facial expression, posture - which create discomfort or uneasiness in interactions with sighted people. The seeing child acquires a variety of modes of expression through imitation - facial expression, pantomine, body demeanor. As an infant, he may have seen his mother nod, smile with approval, or approach with a raised pointed finger, meaning "naughty child." Schoolmates wave hello and goodbye. The shrug of shoulders means "I don't know" or "I don't care;" the lifted eyebrow expresses disapproval or displeasure. These behaviors are observed unconsciously as everyday kinds of communication. Not so for blind children. Their absence accounts for some of the differences in the social setting. In a similar context, Goffman (1974) writes:

> The blind person not directing his face to the eyes
> of his co-participant violates the communication
> etiquette and repeatedly disrupts the feedback
> mechanics of spoken interaction....this failure to
> meet a social norm has a pervasive effect on the
> defaulter's acceptability in social situations (page 129).

Other rigidities which further accentuate blindness are unnatural movement, awkward body posture, not looking at the person being addressed, and so on. Given this picture of a "frozen face" or "deadpan" person whose movements are stiff and wooden, little wonder that sighted people all too hastily conclude that the blind person is stupid, odd, or that irrevocably damning epithet, "different." Because his gestures, motions, facial expressions, and bodily demeanor seem, as indeed they can be, awkward, rigid, constrained, lacking in feeling and emotion, little wonder that sighted people are thoughtlessly or politely somewhat tentative about accepting him as really "like other people" (Monbeck 1973).

An experiment, undertaken at the Greater Pittsburgh Guild for the Blind in the summer and fall of 1976, aimed to train congenitally blind adults in the body language commonly used by sighted people. The program covered eye contact, appropriate facial expression, dress,

gestures, gaze direction, rate of speech, voice quality, haptics, social amenities, and the use of visual terms such as "look" and "see." Results indicated that non-verbal as well as verbal behavior of the blind could be modified and that such modifications facilitated social contact with sighted people (Bonfanti 1979).

Arnheim, Ochsler, and Crow (1973) suggest an individually planned program to develop neuromuscular strength, good posture, free and graceful movement, poise, and self-confidence, that will, in addition to eliminating blindisms (rocking, rubbing eyes), promote acceptance of the handicapped by their sighted peers.

> Through movement experiences, the child with a
> vision loss has a better understanding of himself
> and others in the world around him....He should be
> encouraged to run, jump, climb, throw....The
> potential of physical education for the development
> of social competence may well be an important
> medium for enhancing the social maturity of blind
> children (pp. 313-314).

In a holistic approach, integrating the physiological, personal, and social levels, Connor and Muldoon (1973) recommend a hierarchy of developmental experience – physical, educational, social, vocational – to meet the total needs of the individual to independently and responsibly participate in the sighted world.

Recognizing their differences in need, the authors analyzed them in fours groups – congenitally totally blind, congenitally visually impaired, adventitiously totally blind, and adventitiously visually impaired.

The plan for training all blind persons includes mobility, communication, information collection, physical expression, and psychological functioning.

> Mobility is important in meeting the needs for
> employment, developing a sense of social adequacy
> and personal adjustment....Proper spacial orientation
> to places, persons, and things will heighten the
> individual's confidence in himself and the ease with
> which he interacts with persons, places, and things.
> This, in turn, is an important asset to psychological

functioning, being a defense against feeling alone
or lost (Connor and Muldoon, 1973, page 355).

D. Vocational Orientation

There was a time when agencies, such as the Veterans Administra-
tion, compiled lists of jobs considered suitable for the blind.
However, as Magers (1972) points out, the ever-widening range of jobs
in which the blind are proving successful has made such lists obsolete.

Surveying the social and economic plight of the blind as late
as 1968, Josephson could still write:

> Most blind people are scandalously poor....At least
> half of the blind people receive various forms of
> public assistance. It is doubtful whether any other
> group in our society has such a large proportion on
> relief (1968, page 28).

Fortunately, as in the personal, social, and educational spheres,
the shift of focus from decrying public attitudes to reducing the
effects of blindness was also taking place in the area of employment
in indirect as well as direct ways. In their discussions of the
responsibility of career educators, Bauman (1954) and Barraga (1976)
emphasize mobility, independent living skills, interpersonal relation-
ships, and social competency.

Whereas the standard components of vocational training have
long been based on skills alone, today's counselors recognize the equal
importance of mobility, appearance, social image, and, as Lowenfeld (1975)
suggests, an assertive stance in the job interview:

> The self-assertive job seeker who meets a prospective
> employer disagrees, by his assured behavior, with
> the expectations of the employer who harbors the
> common prejudices about him as a blind person. By
> taking the intitiative at the beginning of the inter-
> action, he counteracts the uncertainties and doubts
> which the employer may feel about how to behave
> toward a blind person. These uncertainties and
> doubts may concern such procedural matters as offering
> a seat, referring to blindness, avoiding such words
> as "see" and "look" and, in general, talking realisti-
> cally about any problem that the blind person may meet
> in his work, in his relationship with other workers, in
> getting about within his working place, or in getting

to and from work. The self-assured job-seeker will
answer questions pertaining to these problems with
positive solutions and with optimism....Success or
failure in this initial encounter can play a decisive
role in the economic future of the blind person (pp. 144-145).

An innovative program, sponsored by the Portland Commission for
the Blind, stresses skills necessary in finding and maintaining jobs.
Focusing on independent job recruitment, clients are taught procedures
in securing the job interview, appropriate dress, waiting room etiquette,
how to handle introductions, occupational exploration, practice in
writing letters, filling out applications, and ways of interacting with
the employer.

The client learns that the first impression is crucial, and hard
to change later. There are no erasers on the pencils. The job applicant
must inspire confidence, must be prepared to answer questions, such
as "What do you mean by legally blind?"; "How will you get to work if
you can't travel?"; "What do you do in case of emergency?"; "What will
you do with your dog during the day?"

Through practical techniques that require initiative (in adapting
to new physical environments and information-gathering), and through
role-playing, discussion, and feedback, the counselor helps the job
candidate grow in self-understanding and positive self-image (Dixon 1979).

E. Self-Concept

Self-concept, as a developmental phenomenon in the structure of
personality and social interaction, has been a recurring theme in much
of the literature on human behavior. Earlier cited in this chapter
is the extensive attention devoted to the effect of societal attitudes
on the self-perceptions of the blind, the result of what Harry Stack
Sullivan and others described as the reflective appraisals of sig-
nificant others (in Zurcher, 1977). Reference was also made to the
findings of Sommers (1944), Norris (1956), and Langley (1961) con-
firming the incorporation in the self-image of blind children of the
attitudes and expectations of parents. Also noted were adaptive
techniques that ease social acceptance.

Relatively few studies examine the ways in which blind people
perceive themselves. Using the Chicago card-sort technique and two

interviews, Jervis (1959) compared the self-concepts of blind and sighted adolescents. Both groups were matched in age, sex, intelligence, socio-economic status, levels of freedom from emotional disturbance. In the first interview they were asked such stimulus questions as "How would you describe yourself to a stranger?"; "What do you consider some of your strengths and weaknesses?"; "How do you feel about the future?"; "Where do you see yourself in five or ten years?" In the second interview they were asked to sort the cue cards twice, once for the statements which best described themselves as they were, and once for the statements which best described how they would like themselves to be.

Two psychologists independently judged the interviews, and no significant differences were found between the self-concepts of the two groups. The results also showed that the blind students tended to be more apprehensive about their future, more aware of their need to get along with others. They felt less able to control outbursts of temper or aggression. Other findings showed that more of the blind students felt that people generally did not expect enough of them. Jervis summarizes his findings thus:

> This study suggests that in personality development,
> blindness may be considered more than just sight
> deprivation but not a completely crippling factor.
> The fact that the blind subjects pushed either to an
> extreme negative or extreme positive attitude toward
> themselves would indicate that they had difficulty
> in normal adjustment....he is forced into having a
> negative self-concept, or if he is fortunate enough
> to find positive attributes in his personality, he
> tends to exaggerate them....It appears that the
> public does not respond to blindness per se but
> reacts to the way an individual blind person lives
> his life (page 25).

Examining the self-concept formulation of blind and visually handicapped adolescents, Thomas Meighan (1971) administered a standardized Tennessee Self Concept Scale (TSCS) to 203 students from the Maryland and Overbrook residential schools for the blind. The students were divided into sub-groups according to race, sex, and degree of visual impairment. The TSCS measures self-criticism, identity, self-

satisfaction, physical self, moral-ethical self, personal self, family self, social self, behavior, and variability. The TSCS was used to indicate significant differences from normative scores. Other tests, not pertinent to this study, such as the Stanford Binet and Wechsler Intelligence were also used.

Profile scores of the handicapped were consistently more homogeneous than the norm, indicating, according to Meighan (1971), that "the blind and visually handicapped suffer from their perception of the pity and inferior status in which society holds them and that this negativism is the result of society's fixed ideas and thinking rather than something within the personality structure of the blind and visually handicapped themselves" (page 31).

All the basic elements of self proved negative for the visually handicapped by at least one standard deviation, and were significantly different from the TSCS norm beyond the .01 level of confidence. The three lowest scores, in this order, were physical self, representing the person's view of his body, appearance, skills and state of health; behavior, the person's perception of the way he functions or acts; and moral-ethical self, feelings of worth, feelings about good or bad relationships, and about God, religion, or the lack of it.

Physical self scored lowest, agreeing with the findings of Cowen et al. (1961) on the psychological impact of physical loss experienced as a result of disability. Self-acceptance, as measured by self-satisfaction, measured highest.

The results of Thomas Meighan's research prove "that blindness has a definite and distinct effect upon the development of personality," and that the self-concept of the blind is influenced by the appraisal of significant others (1971, page 31).

In a study of the relationship between self-concept and success of blind students in the freshman year of college, Clyde R. Smith (1972), focusing on the persistence of the students, also used the Tennessee Self Concept Scale. His subjects were 45 students ranging in age from 16 to 28 with an average IQ of 115. He found that the persistent students had healthier self-concepts, coped better with the stress in adjusting to college, were less variable in their answers. The

non-persistent students had poor psychological defenses, were more
confused and conflicted in their self-perceptions, had lower self-
esteem, particularly in terms of self-satisfaction, and had low person-
ality integration scores, indicating less frustration tolerance and
personality strength.

In summary, what emerges from the literature relating to the
adjustment of the blind is a dual view. The classic view represented
the blind as absorbers and reflectors of the stereotyped assignations
of dependency and passivity, as occupying a marginal place in society.
A more recent view regards them as a potentially liberated group,
differentiated in status by genetic and experiential factors that
affect interpersonal relationships, as well as the nature and extent
of involvement in the wider environment, the seeing community. As
yet unexamined is the way in which blind people see themselves, and
what, if any, relationship such perceptions have to their degree of
integration.

"Pencil and paper opinions," writes Harry Dale Baker (1973),
"may differ from actual confrontations. To date, research has centered
on attitudes toward the blind and on assessing the personality of
blind persons. There is a lack of studies of interpersonal behavior
of blind and sighted persons at school, at home, at work, at play,
and in other social situations" (page 353). George Delafield (1976)
corroborates this opinion:

> Most studies of the social adjustment of blindness
> have been concerned with the role of significant
> others, or with variables unrelated to the indivi-
> dual. Attitudes of the blind person toward himself
> have been largely ignored. The final adjustment
> will be the result of the interplay between the
> blind person's ability to perform certain tasks and
> their attitudes and expectations (page 68).

In the course of his or her development, the individual learns
the customs and roles that society values. These, however, are not
the totality of what the person is. The literature bears out the
fact that the feelings, thoughts, and actions that make up the
blind person's behavior will also bear the imprint of parental attitudes,

of various kinds of training, and of certain basic life experiences.
The questionnaire segment of the instrument used in this study was
developed around such life experiences in the home, in the school,
at work, and at play - namely, early childhood experiences, education,
mobility, vocational experiences, activities of daily living, social
interaction, physical skills, diversity of interests, and attitude
toward handicap. Under the rubric of self-concept and independence,
the study aims to explore the relationship between the subjects'
personal and social characteristics and their degrees of integration.

III. METHODOLOGY

The Problem

Despite accelerating integration, numerous reports are still extant
of discrimination on the job, exclusion from solo travel and recreational
and residential facilities, denial of rights to insurance, jury duty,
parenting, etc. for blind persons. "While it is true that social
rejection is much less a problem today for blind people than it was
during antiquity or the Middle Ages, it is still the case that irrational
rejection, particularly in the form of discriminatory employment practices,
continues to be a critical source of frustration for the bulk of the
blind population, not only in the United States, but also in all other
countries of the world as well" (Kirtley, 1975, page 186). And, as
stated in the September 8, 1980 issue of U.S. News and World Report,
"While the jobless rate of the nation as a whole stands at 7.8%, about
half the 5.1 million disabled citizens fit to work cannot find jobs."

Stereotyped attitudes persist. Not realizing that the sightless
worker has, of necessity, learned to take greater precautions for his
safety than does the average worker, the employer is afraid to hire
him/her. And even if the blind person is hired, does success on the job
result in comfortable interpersonal relationships with co-workers? Does
just sitting next to a seeing person in school guarantee welcome par-
ticipation in the social life of the school? It may very well be that,
despite the shift in the kinds of activities in which blind people are
involved, integration in the sense of mutual acceptance, has not occurred
at all. The fear and avoidance of earlier times simply may have been
replaced by a latterday stigmatization so that social interaction be-
tween seeing and blind persons, however intensive, still focuses on the
blindness of the latter. Blindness, with it's stereotypic implications
of darkness and dependency, is implicit in the identity of persons
without sight. The author, the musician, the friend, is introduced
or referred to as "the blind author," "the blind pianist," "my blind
friend." Again, this illustrates Wright's "spread phenomenon."

This is an important consideration, for it points to a dilemma which blind persons share with all those who belong to groups, hitherto discriminated against in one fashion or another, whose rights to schooling, employment, etc., have been recognized increasingly in recent times. Attempts to overcome disadvantages persons have suffered because of membership in certain groups may perpetuate the very stereotypes which had engendered the disadvantages (Myrdal 1962). In the case of blind people, the dilemma is especially marked. All blind people depend to some extent on such specialized training as learning Braille, the use of aids in mobility (white canes or guide dogs). Many benefit from assistance in acquiring the techniques of activities in daily living and vocational skills. For this training they enroll in agencies offering such services to the blind, generally sheltered environments in which most of their interaction is with other blind persons. Thus, the very agencies which blind persons depend upon to provide them the skills necessary to activity in the seeing community may have the unintended consequence of perpetuating self-images which are restrictive and stereotyped. Add to this the fact that many blind persons have been over-protected at home, ghettoized by remoteness from necessary services, and have experienced protracted segregation in education, recreation, and sheltered employment, and the probable outcome would be persons whose self-image ill prepares them for integration.

Although this negative picture may indeed be characteristic of the plight of many blind persons, there are some individuals who seem to have managed, at least on the behavioral level, to break free of the blind "subculture" and to spend all or most of their time interacting with seeing persons. However, what kinds of life experiences have made this possible for them, or whether there has been a corresponding shift in self-image, is not at all clear.

The experiences may be thought of or conceptualized as multi-dimensional. That is to say, they include the interactive settings in which the blind person has moved and continues to move as well as the way in which the person presents her/himself (Goffman 1969). Similarly, self-image is multi-faceted in that it includes the person's perceptions of her/himself from the inside as well as perceiving oneself in the view

of others, what Charles Horton Cooley (1956) has called "the looking glass self."

The problem addressed in this study is to determine the ways in which personal and social characteristics, under the rubric of self-concept and independence, relate to integration.

Purpose of the Study

Turning to blind people themselves, the purpose of the study is to determine how self-perception and independence of congenitally blind persons relate to their primary, moderate, or lesser degree of participation in community life.

It should be noted that this study only focuses on one side of the equation, so to speak. Although we have defined integration as mutual acceptance, we are only interested here in what blind people themselves have reported as integrated experiences.

The Questions

This study will address four questions:

1. What are the dominant modes of self-perception of the subjects under study?

2. To what extent are the subjects independent?

3. To what extent are the subjects integrated?

4. What are the relationships between the subjects' self-perceptions, independence and integration?

The Definition of Terms

In this paper, the term "integration" will refer to the degree of association, functioning, and participation of blind with seeing people at home, at school, at work, in recreation and in other social interactive situations.

Unless otherwise specified, the term, "blind persons," will refer to those who have total sight loss or no functional vision since birth or early childhood. The term "early childhood" refers to pre-school years.

The term "independence" will be interpreted as self-reliance
as revealed by responses to the survey, both to the questionnaire and
the Twenty Statements Test (TST).

The term "self-concept" will be interpreted to represent the
self-portraits as assessed by the TST, as well as the eleven categories
of the questionnaire.

The term "lifestyle" will refer to the lifespace, the social
orbit - integrated or segregated - in which blind persons live their
lives.

Methodology

A. Population and Sampling Plan

After following the required procedures for the protection of
confidentiality, the San Francisco Department of Rehabilitation agreed
to provide a list of closed cases of congenitally totally blind
clients whom it has served over the past three years. The computer
supervisor reported that there were only six such cases.

A notice was then placed in three national Braille magazines -
The Ziegler, Dialogue, and Variety News - inviting congenitally and
totally blind readers to participate in a study on integration of
blind persons. One hundred and twenty-three persons responded, a number
of them on the condition that both their questions and responses be
in Braille. This caveat suggested that they lacked access to a sighted
person to fill out their questionnaires, that they did not type well
enough to do so themselves, or that they did not wish to divulge
personal information.

The questionnaires, in both Braille and print, were mailed, with a
self-addressed, stamped envelope, to the 123 respondents. Forty-nine
did not reply. A total of 74 respondents are included in this study.
Twenty people filled out and returned their questionnaires promptly;
over the ensuing five months, the additional 54 were received, these
requiring interim reminders.

The failure to respond may have stemmed from lost interest,
loss of information as to where to send it, being too busy, or just
procrastination. Another serious problem was a notice in the same

magazines of a concurrent survey aimed at congenitally blind persons
on the subject of sexuality.

B. Instrumentation

The instrument consists of two parts, a questionnaire (see
Appendix A) developed by a committee of experts (1) and the researcher,
and the McPartland Twenty Statements Test (TST). The questionnaire is
composed of eleven categories covering demographic information,
personal and social characteristics, past and present experience and
attitudes. The questionnaire seeks objective and qualitative data
revealing the primary social space in which the subject moves, as well
as the factors affecting those types of environments. The self-portraits
afforded by the TST disclose the nature of the subject's self-perceptions.

In the questionnaire the demographic information covers age, sex,
degree of vision, marital status, number of siblings, geographic loca-
tion, and size of city. To reflect cardinal life experiences and the
nature of social participation the questionnaire used the following
nominal categories:

Early Childhood Experiences

Education

Mobility

Vocational Experiences

Activities of Daily Living

Social Interaction

Social Conformity

Physical Skills

Diversity of Interests

Attitude Toward Handicap

Opinion as to Factors Affecting Integration

In view of the assumed crucial role of early childhood experience
in determining the individual's self-concept and orientation to others,
the questionnaire seeks information about the subjects' experience of

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(1) The committee consisted of Dr. Robert C. Lamp, Dr. Ralph Lane,
Dr. Emily Girault (members of the faculty at University of San Francisco),
and Dr. Berthold Lowenfeld, internationally known authority in the
field of blindness.

acceptance or rejection in the home, and whether or not playmates and pre-school mates were seeing or blind children. To shed additional light on the subjects' self-concept, the questionnaire inquires as to attitude toward blindness. It seeks similar information at the elementary, high school, and college levels about education and training, and vocational experience.

The questions in the categories of mobility and activities of daily living aim at measuring the subjects' self-reliance in travel, shopping, cooking, cleaning, and grooming. As indicators of the extent and quality of interpersonal relationships, questions on social interaction refer to friendship, initiative, feelings about criticism, teamwork, adaptation to new situations, self-confidence, responsibility, sensitivity, attitudes, body language, and whether or not vacations and other social activities are enjoyed with blind or seeing people.

Questions cover physical skills including posture, sense of direction, muscular coordination, exercise, and sports - such as swimming, hiking, dancing, skating. For insights into sources of self-expression, they ask about participation in arts such as music, sculpture, and theatre attendance. As indicators of social conformity, questions concern punctuality, manner of dress, and meal etiquette. Finally, the questionnaire asks the subject's opinion as to those life experiences which they attribute to their primary association either with blind or seeing people.

The questions are designed to convey a picture of the subjects' pattern of living, that is to say, the salient experiences and the tenor and quality of feelings engendered by those experiences. They are designed to indicate the social setting in which the subjects move as well as their interactions in those settings.

According to Zurcher (1977), the TST should prove a useful, if not conclusive tool in judging self-concept. Because it has yielded consistent results with both normal and deviant populations and with various age groups, the TST may be considered both a valid and reliable instrument.

The TST provides an assessment of self which is not as structured as it would be in the case of check lists, rating scales, or card

sorts. The respondent is given a sheet of paper with twenty numbered lines headed by the question "Who am I?" and a set of instructions. (In this case, subjects were given the choice of typing or brailling their responses.) The instructions read: "In the twenty blanks below, please make twenty different statements in response to the simple question addressed to yourself, "Who am I?" Write as if you are giving the answers to yourself, not to somebody else. Give your answers in the order they occur to you. Don't worry about logic or importance. Go along fairly fast."

In practice, the TST has been primarily used to derive information concerning the self as object, the "Me," but with scoring protocols, the instrument can also give indications of the self as process, the "I." One such scoring protocol in the A,B,C,D method invented by Thomas McPartland, John Cumming, and Wyona Garretson (Zurcher 1977). They established four categories in which TST respondents can be placed: (A) Physical, (B) Social, (C) Reflective, and (D) Oceanic. Each of the categories represents a discreet grouping along a continuum of self-identifying references at a different level of abstraction from social structure and social experience. Categories (A) and (B) may be spoken of as objective self-identification; the (A) category collects responses which identify self as a physical being while the (B) responses are more social in character. The (C) and (D) categories comprise self-identifications which are, so to speak, subjective in reference. The (C) category statements identify the self in reference to socially relevant characteristics of action, habit, or mood. The (D) category contains subjective identifications, standing apart from social groups.

(A) Physical

The (A) Physical category is a concrete class of statements picturing a person without reference to or involvement in social relations or socially consequential actions. It is the kind of information found on identification cards or automobile licenses - "I am five feet tall;" "I am blond;" "I weigh 110 pounds."

(B) Social

The (B) Social mode describes people involved in more or less structured situations. This category contains reference to statuses

which are socially defined and can be socially validated. Such identifications are illustrated by such statements as "I am a father;" "I am a college graduate;" "I am a homeowner." If a person identifies him/herself as a homeowner, certain daily disciplines and relationships can be predicted.

Statements are included in this category which give status to less clearly institutional self-reference, such as "I am a music lover;" "I am a newspaper reader."

(C) Reflective

The (C) Reflective category of self-identifying statements include those which are abstract enough to transcend specific social situations. They describe the style of behavior which the respondent attributes to him/herself. This situation-free mode is exemplified in such statements as "I am a happy person;" "I am economical;" "I like good music." Statements in this category do not pin the respondent down to specific behavior, but leave him free to interact in various situations while maintaining his/her style. They support the prediction about the manner but not the context in which he/she will behave.

(D) Oceanic

The (D) Oceanic category consists of statements which are so comprehensive in their reference that they do not lead to socially meaningful differentiation of the person who makes the statements. These kinds of statements are vague and lead to no reliable expectations of people's behavior. For example: "I am a living individual;" "I am a person who wants the best for everyone." This category also includes statements which are offered as replies to the twenty statements problem, but, in fact, deny the question. These types of replies are exemplified by such statements as "People are not trustworthy;" "Streets are not safe these days."

It is important to note that although the (D) category is described negatively, it is not a residual category in that statements that do not fall in categories (A), (B), (C) are collected in (D). Together the (A), (B), (C), (D) self-identification statements represent a construct which ranges from the conception of self as a physical structure in time

and space (Category A), to the description of self as existing in re-
lation to social entities (category B), and of the social interactor
somewhat abstracted from social relations (category C), to conceptions
of the self, abstracted from physical being, social structure, and
social interaction (category D) (Zurcher 1977).

The letters used to designate the categories avoid any instance
of goodness or badness which descriptive definitions might invite.
They are used to characterize respondents as well as responses. Nearly
all TST respondents show a mode in one of the four categories; that is,
they make at least one more statement in some one scoring category
than in any other. Thus, there can be an (A), (B), (C), or (D) modal
respondent. It is understood that the person can manifest all four
kinds of self-concept. One mode might be temporarily preferred over
the others depending upon the circumstances in which the individual
finds him/herself, but more likely, persons by socialization come to
favor one mode over the other, thus manifesting a rather consistent
dominant mode.

According to Zurcher, the TST is based on several assumptions:

1. The symbolic interaction as explanation of the development of
self is plausible, and the result of that development can be assessed.
For example, Wyona Hartley Garretson (Zurcher 1977) did extensive
studies using the TST to assess the predominant self-concept in American
society. She administered it to students in graduate schools, colleges,
high schools, medical schools, various work organizations, and voluntary
associations. Her reports and observations of research showed that
accelerated social cultural change in American society is moving people
away from the (B) Social self-definition, the self as object, to the (C)
Reflective mode, the self as process.

2. Important parts of the self are available to consciousness
and can be put into words.

3. Self-perception is relatively consistent across varying
social situations and events, and thus the TST can validly assess
what self-attitudes are relatively consistent.

4. The TST can measure self-perception repeatedly with minimum
measurement error and thus is a reliable instrument.

5. Self-perceptions can change dramatically if the individual's social experience and salient social structure change dramatically. If self-perception does so change, the TST will assess that change.

In 1970 the TST was administered to a representative sample of fifty-eight ex-felons who had been in prison a minimum of two years. Before release from prison, their responses on the TST were "I am prisoner number one;" "I am prisoner number two;" "I am prisoner number three;" etc., characteristic of the (A) Physical or (B) Social modes of self-identification. At a later date, when released from prison, their responses on the TST indicated a turning inward typical of the (C) Reflective mode. They made such statements as "I am a scared ex-convict."

Similarly, a group of dissident priests who signed a petition calling for the removal of their archbishop in protest to what they considered to be a too conservative stance by their church, responded to the TST originally with such statements as "I am president of the local council of churches," characteristic of the (B) Social mode. In a follow-up study their responses shifted to the (C) Reflective mode in such statements as, "I am a searching person....I am a questioning priest," showing that they were no longer dependent on a social structure and had changed to an evaluative or searching self-image.

Administered to a group of non-dissident priests, the TST yielded contrasting results: 50% identified themselves as (B) mode, 20% as (C) mode, and 25% as (D) mode.

6. Self-perception is related to behavioral choices. Knowledge of self-perception yields predictability of behavior (Zurcher 1977).

C. Research Design, Data Collection and Analysis

Items in the eleven categories of the questionnaire were regrouped under three rubrics: Self-Concept, Independence, and Integration, as follows (note item numbers in questionnaire):

I. Self-Concept:
    SC1 - Early childhood experience, items 16, 18
    SC2 - Education, 29, 30
    SC3 - Vocational experience, 35, 39
    SC4 - Social interaction, 58, 64, 66, 69

SC5 - Social conformity, 75, 77
SC6 - Attitude toward handicap, 25, 34

II. Independence:

IND1 - Present experience, 10, 13
IND2 - Childhood experience, 19, 20
IND3 - Education, 19, 20, 23, 28
IND4 - Mobility, 31, 32, 33, 38, 39
IND5 - Activities of daily living, 46, 52
IND6 - Social interaction, 59, 60
IND7 - Social conformity, 76
IND8 - Vocational experiences, 33, 34, 36

III. Integration:

INT1 - Social interaction, 35, 55, 65, 66, 69, 70, 74
INT2 - Diversity of interests, 7, 24

Each item, appropriately coded, was assigned a score. The scores
for each subject were summed and ranked according to high, moderate,
or low. Where a number of items occur under one category, a composite
score was obtained.

Inasmuch as the data collected from the questionnaire and the
TST consist of nominal categories, nonparametric statistics are used
to determine relationships between and within the three main groups.
Frequencies for each category, using the Statistical Package for
Social Sciences (SPSS) manual for discussion, are presented in Appendix A.
Kendall's Tau measurement of association is used to determine the
relationships between Self-Concept and Independence, between Inde-
pendence and Integration, and between any one with any two of the others.

Reliability of the questionnaire was obtained by conducting
interviews of ten qualifying persons, residents of the San Francisco
Bay Area, before and after the questionnaire was mailed out.

To establish reliability of the scoring of the TST, three judges
were asked to assign scores to the statements in the test, not only
as to the McPartland dimensions of physical, social, reflective, or
oceanic, but also as to the degree, positive, neutral, or negative,
to which their statements reveal self-concept, independence, and
integration. These scores were summed for each of the 74 subjects,
and ranked according to positive, neutral, or negative. The congruent

scores of two of the judges, with help from this investigator should there be problems of agreement, decided the final score.

Limitations

The inherent weaknesses of the survey as a tool of research are well known. Responses are incomplete. Subjects reply in ways they believe suitable or favorable to the purpose of the study. Replies may be colored by the mood or circumstance at the time they are filling in their answers, or, despite assurances of anonymity, some may feel they must put their best foot forward.

Three items in the questionnaire failed to elicit pertinent information: "I enjoyed dating" should have indicated "with blind" or "with seeing people," and, similarly, under Vocational Experiences, the question neglected to ask whether the colleagues at work were sighted or blind. In the last item, "I attribute my associations with predominantly blind or predominantly sighted people to..," more explicit information would have been received had the respondents been given an opportunity to check "blind" or "sighted" separately.

Implications and Significance of the Study

Although the majority of blind children do, indeed, today attend school with seeing children, data on the extent to which integrated education has helped to draw them into the mainstream are as yet not available. This study may suggest that, in addition to bringing sightless and sighted children together in the classroom, units designed to give insights into blindness should be incorporated into the curriculum at the elementary and secondary levels of schools as a standard part of the education process.

In turning to the blind themselves for insight into how they view themselves and the world around them, the study suggests a not as yet fully utilized source of understanding of blindness and of how to meet its challenges. It has been noted that legislation, technology, and the efforts on the part of the blind themselves have improved their status in society. As yet unclear is the extent to which such forces have increased their social participation in the work force. In

addition to helping blind people acquire vocational training and
find jobs, the responsibility of rehabilitation agencies may also be
an intensification of employer and employee education. The inter-
relationships of self-concept, independence, and integration, as
revealed in the study, may suggest a new emphasis in a relatively
neglected area, namely, social training designed to reduce or eliminate
problems connected with verbal and non-verbal interactions with
seeing people.

IV.   PROFILE OF SURVEY PARTICIPANTS
SUMMARY OF DATA

The typical respondent to the integration questionnaire in this study lives in one of the large cities in the western part of the United States, is between the ages of 21 and 30, felt accepted in early childhood, had a combination of segregated and integrated school experience, participated in student activities, is a college graduate, is single, found his or her own job, has mainly seeing friends (which the subjects explained as mainly due to self-concept, early childhood experience, and education), belongs to both blind and seeing groups, uses the white cane for travel, and resents public stereotypes about blindness. They represent a critical minority – a cutting edge – that may indicate where many blind people will be headed in the future.

Forty-eight or 64.9% of the survey participants were between the ages of 21 and 36, indicating they do not represent the largest number of blind in the population, estimated at 65 years or older (Gish 1976). Similarly, as to sex, they do not correspond to the distribution of males and females in the general population; 27 or 36.5% were males, and 47 or 63.5% females. As to degree of vision and onset of blindness, they qualified well for the purposes of the study – 56 or 70.6% were totally blind from birth, and 21 or 28.5% were blind since early childhood. 52 or 70.3% had only light perception, 12 or 16.2% obstacle perception. Bearing in mind that this data represents self-report, the subjects showed a predominant trend toward integration. 66 or 89.2% reported that they participated in school activities, and 61 or 82.4% that they made friends with seeing students. By far the smallest number of respondents, 13 or 17.6% were married to a blind spouse. 22 or 29.7% had a seeing spouse, implying, at least to some degree, social participation with seeing people. 45 or 47.3% were single, 3 or 4.1% divorced, 2 or 2.7% living together, 3 or 4.1% widowed.

Regarding vocation, only 13 or 17.6% were unemployed, a surprisingly low number vis a vis the extent of unemployment in the general population. The group reported a wide range of jobs and professions. 30 or 40.5% found jobs through their own effort; 4 or 5.3% through school, 7 or 9.5%

through a friend, 17 or 23% through the Department of Rehabilitation
(again a surprisingly small number since the great majority of blind
job seekers traditionally apply to this agency for assistance in finding
a job).

In addition to the jobs in which blind people are usually placed
(those listed in the questionnaire - social worker, secretary, mechanic,
computer programmer, x-ray technician, dictaphone transcriber, con-
cession operator) and the item "unemployed," most respondents checked
the response, "other," breaking stereotypes with the following job
titles:

radio announcer
math teacher in a public high school
Latin teacher in college
college professor
salesman
rehabilitation counselor
rehabilitation teacher
telephone service representative
word processing operator
information specialist in Social Security Administration
human rights specialist
college administrator
music teacher
author
scientist
assembler
journalist
lawyer
computer consultant

In addition to the items checked under "Special Training" (arts and
crafts, music, vocational, speech), the subjects listed under "other,"
the Optacon, radio license III, dance, dramatics, flower arranging, home
repairs, theology, x-ray technician, law, Russian, switchboard work,
test subject for echo location, pottery, flute, judo, and karate.

Fifty-two or 70.3% felt accepted on the job, and the same number
reported that they joined in social activities at work. 38 or 51.4%
felt that they had equal opportunity on the job; 19 or 25.7% did not
feel that way. A sense of the overall quality of the group was revealed
in their responses to the question, "What do you consider your greatest
reward on the job?" Five, or 6.8% indicated feeling accepted; 1 or 1.4%
chance of promotion; 6 or 8.1% recognition; 10 or 13.5% salary; and

doing something worthwhile, 27 or 36.5%.

Concerning discrimination on the job, 8 or 10.8% checked sex,
1 or 1.4% race; 2 or 2.7% age; 38 or 51.4% felt discriminated against
because of handicap.

The subjects showed a strong interest and participation in the
life around them. 49 or 66.2% reported that they took initiative in
social situations. 40 or 54.1% took responsibility in community affairs.
This striking percentage of active participation by blind people ob-
viously outranks that of an equal group of sighted individuals, and
may suggest an assertive effort to achieve social integration. The
group showed their maturity in their indication that 66 or 89.2% could
take criticism. 67 or 90.5% showed flexibility in their reported ability
to adapt to new situations. Not surprising, since most of the subjects
were women, 48 or 64.9% was the number who liked to dress according to
the current mode; 26 or 35.1% were indifferent to fashion trends.

As with school and work, the group showed a full and varied
participation in free time activities. 43 or 58.1% participated in
swimming; 26 or 35.1% in boating; 39 or 52.7% in hiking; 34 or 45.9%
in dancing; 44 or 59.5% played an instrument; 57 or 77% enjoyed the
theatre; 59 or 77.7% attended concerts; 44 or 59.5% played table games;
and 29 or 33.8% enjoyed crafts.

In the main, the group showed a positive attitude toward blindness.
Interesting and somewhat hard to explain was the number of those who
often found their blindness an adavantage - 24 or 32.4%.

Only 5 or 6.8% considered blindness the worst thing that could
happen to anyone (66 or 85.1% did not). Only 12 or 16.2% often con-
sidered it a burden; 17 or 23% often a cause of isolation; 11 or 14.9%
found their blindness often painful; 8 or 10.8% often an embarrassment;
32 or 43.2% often a source of frustration. The same number (32 or 43.2%)
often found their handicap a challenge; 29 or 39.2% often a disadvantage;
39 or 52.7% found it often an inconvenience.

The mainly positive attitude reported by the participants of
their adjustment to their handicap may in part be explained by the
fact that congenitally blind people make their adjustments in the
formative years of their lives, almost instinctively developing their

senses of touch, hearing, spatial awareness, as well as memory.
Moreover, they do not suffer the sense of loss experienced by the
adventitiously blind (Cohen 1966).

Asked to what they attributed their predominantly seeing or blind
associations, 12 or 16.2% indicated attitudes in early childhood;
2 or 2.7% training; 6 or 8.1% education; 4 or 5.4% skills; 14 or 18.9%
self-concept.

Of the 74 participants in the survey, 73 filled out the TST sheets.
Several were incomplete. One subject made only one statement ("I am a child
of God"), another made four, and several varied between 11 and 17 statements.
One person added the following to her twenty statements: "I adjust to
new situations, not because I like them or because I am so flexible, but
because I have a history of doing what I know I must even when someone
else wouldn't. Because of a number of nice people, mostly from ours and
other churches, we are managing very well in the sighted world without
sufficient preparation. Attending several classes in high school at a
public school was not very beneficial socially; but in spite of our
limited communication with sighted people at school, we still support
the system of residential schools for the blind."

There were many mentions of love of animals and intelligence, but
the main references in the TSTs were to blindness, religion, public
attitudes, reading, and music.

BLINDNESS

There were 42 references to blindness. Sixteen identified themselves
as blind, "I am blind" being the opening, and in one case, the closing
statement. Examples:

"I have no bitterness because of my blindness."

"I am fascinated about the possibility of electronic technology for the
blind."

"My wife is an exceptionally talented and wonderful person; never has
she in any way made me feel that being blind made a bit of difference."

"I would like to be able to see but I'm willing to wait for God's
direction and timing."

"I am enjoying working with blind people and am learning a lot about
myself and about blind people in general."

"I feel being blind helps overcome color barriers."

"I am tired of identification as a blind person rather than as a person."

"In my years of living with my blindness, I have accomplished most things that sighted people do, even driving a car....sometimes I forget about being blind."

"I am jealous of my friends having sighted friends."

"I am motivated by a need to prove myself to myself and others. I am motivated by anger, i.e., 'I'll show them I can do it'."

"I feel well adjusted to blindness."

"I am a person whose friends tell they often forget I'm blind. I consider myself not one of the blind people."

RELIGION

There were 24 references to religion. Examples: "Glad I found such a neat church to belong to."

"I'm a Christian, active in our local church and in the study of the Bible."

"I am a daughter of God."

"I am a person trying to grow in the life of God."

"I have great faith in God."

"I believe in God; there is the much needed help that I need and receive."

"I am a Christian on my way to heaven."

"I could use a little more religious faith than I have."

"I am someone who believes in God and is looking for the real truth."

"I am one of God's children."

"I feel God cannot be defined."

"I am a non-church going but hopefully practicing Christian."

"I am trying to make the most of whatever opportunities God sends me in the field of Christian service."

READING

There were 33 references to reading, most of them expressed in the sentence "I am an avid reader."

MUSIC

In the 19 references to music, respondents identified the instruments they played, the professions they worked in, the hobbies they pursued.

PUBLIC ATTITUDES - SOCIAL INTERACTION

Among the references to public attitudes are: "I feel it is due to false conceptions about blindness that I have never held a pastorate."

"I resent certain attitudes about blindness in general although I have had little trouble with the public in my own personal experience. I resent other blind people who, by their own behavior, tend to foster the very stereotypes we should be trying to eliminate....I resent sighted people who mistake me for others who are blind just because of the blindness."

"I have constantly been on the alert to be objective, willing to try, though society programs handicapped people to fail at most things except the most menial tasks."

"I am frequently presumed to be incompetent by society; I am fortunate in being regarded as competent by my employer."

"I am resigned to the fact that although limited progress is made on forwarding the aims of the handicapped, basic attitudes will never substantially change."

"I am a person who attempts to look at difficult tasks as a challenge, so that I can overcome misconceptions about blindness."

"It troubles me that society is unconcerned about the handicapped though lip service is given to the contrary."

SELF-DISCLOSURE

The responses in the TSTs were rich in self-disclosure, affording clear evaluations of self and the orbit or life space in which the subjects moved. They represented open expressions of inner feelings, reactions, and attitudes. These responses to the TST might be classified in three levels:

1. Surface statements which revealed nothing of the real person.
2. Uniformly positive statements (all 20 statements being positive) - a possible cover-up of insecurity, overcompensation for the handicap, or an attitude developed by way of survival.
3. Self-critical statements.

Examples of surface statements:

"I'm glad the week is almost over."

"I'm hungry for a big hot fudge sundae."

"I'm going to have a decent lunch today, not just a sandwich."

"I wish it weren't so cold in San Francisco."

Examples of uniformly positive statements:

"I am happy, intelligent, caring, independent, funny, loving, creative,
gifted, have a sense of accomplishment. I have achieved the goals set
for myself, I have a sense of worth."

"I'm superior to most people in many ways."

"I am loving, intelligent, perceptive, strong, muscular, efficient,
work well with my hands, am honest, a good cook, affectionate, innovative,
tolerant."

"I am independent, sociable, understanding, considerate, sympathetic,
tactful, punctual, helpful."

"I am good looking, built nice, have a nice personality."

"I am highly intelligent, a tough son-of-a-bitch, sexually outstanding,
possess better than average leadership, I am right in every stance
I take, I know I am perceived as being very competent in my job."

        Among the self-critical statements, a number expressed anxiety,

frustration, insecurity, discouragement - more than one would expect

in a generally high-functioning group. Examples: "I am unable to
express feelings because of the isolation that blindness creates."

"I am shy, quiet, inhibited, introverted, insecure, inferior, inadequate.
I lack social experience and self-confidence. I have difficulty in
communicating with sighted people because of visual barriers such as
eye contact, gestures, and other sight-oriented matters."

"I often feel awkward in public."

"Blind friends are primarily the few I've stuck with since Braille
classes in school. They tend to be the people with whom I can speak
most frankly when I feel frustrated or discriminated against. Sighted
friends are most likely to have been in task-oriented situations
such as work or school, and to be the people with whom I socialize
more frequently, though less intimately."

"I am independent, intelligent, gainfully employed, attractive, have a sense of humor. I am lonely much of the time however. I am a quiet person initially and feel that the sighted world misinterprets this and feels uncomfortable."

"Sometimes I feel cynical and hostile during times when I'm unable to control certain outcomes in situations. I feel self-conscious about my blindness because during childhood my parents were frustrated by and ashamed of it. I feel relaxed in the sounds of music and nature when experiences related to my blindness get me down."

"I have yet to conquer the emotional and social effects of blindness."

"I am motivated by anger, i.e., 'I'll show them I can do it.'"

"I am discouraged about being blind sometimes."

"I feel burdened by people's reactions to my being blind."

"I often feel like a social misfit."

"I have negative stereotyped thoughts about blindness because of closed-minded environments. I have difficulty in communicating with sighted people because of visual barriers."

"I attend Loyola University of the South and am a major in psychology, with hopes of going on to get a degree in social work, counseling, or corrections. I'd like to help terminally ill or dying people and their families and friends, or do prison work of some kind – in a constructive rehabilitative sense. The women's movement is very important to me – am very active in it – special interests are employment and better pay for women, right to abortions, rights for gay people, better handling by officials of rape victims and the rapists, self-defense, and, of course, rights of handicapped women; and seeing that the women's movement goes into the prisons. I tend to be impatient, and sometimes have a nasty temper. I used to put on sort of a 'front' with people that showed that I was more 'together' in situations than I really was, but am improving in that slowly, thank goodness. I am a Unitarian, as I believe religion is too much an individual thing to be tethered by dogmas and doctrines. I love animals. Deep thinking and sensitivity are important....hope to have children sometime. I'm glad to be married to the guy I'm married to. Most people consider me 'radical,' and so do I. I deal with people better who can accept me, although they may not agree. Those people tend to be my closest friends. I believe in such things as euthanasia, right to abortion, national health plan, gay rights; do not believe in capital punishment; believe in people living together if they so desire instead of marriage."

"I am an interested and an interesting person. I have an average I.Q.

I am painfully shy with sighted people. I feel like no one likes me.
I am jealous of my friends having sighted friends. I am overweight
and lazy. I start things of import but do not continue them. I am
content with my husband. I do not care for sex. When I love, I love
deeply. I feel that my family (mother and siblings) do not accept
me as part of the family because I was away at school when growing up.
I love my children very much, but am very impatient with them. I am
bored to death. I am an avid reader. I like to eat and cook. I am
afraid to go out alone with my cane, but when I have to I do very well.
I am too dependent on my sighted husband. I feel I have never had a
fair chance at the type of job I would like to have, because the State
Commission for the Blind was not interested in getting me that type
of job. I am dreadfully lonely."

"I am gay; superior to most people in many ways, I feel inferior
sometimes though. I am sensual but not a slut. I have psychic abilities.
I am too square for the hep, too pure for the freaks. I am a woman
at last. I am warmer than people think. I am getting to feel life is
passing me by too fast. I am sensitive about others more than myself.
I like my freedom. I want someone to care for, not change me. I am a
music freak."

"I am black, a woman, somewhat educated. I think I'm really in life.
I've had to change some of my opinions about some conventions, such
as religion, education, the American dream. I'm trying to grow by
having my own individual way of thinking about things because some-
times what others tell don't work. I like to cook. I like to eat.
I like to see new places. I do get depressed and despaired sometimes
because I don't know what's going to happen to me. I'd like to travel
to Africa and Jamaica. I like my cat also and will miss her when
she's gone. I like to pick my friends very carefully. I have appre-
ciated positively and negatively, more positively what it means to be
black." (The accompanying questionnaire indicated the above person
was unemployed.)

A number of the TSTs contained inconsistent or contradictory
statements such as, "I am intimidating to people....I am sensitive
to people;" "I am superior to most people in many ways....I feel
inferior sometimes;" "I am intolerant....I am loving;" "I feel
burdened by people's reactions to my being blind....I feel lucky to
be alive, blind or not;" "I am friendly....I am grouchy;" "I am
quiet....I am hyperactive;" "I am somewhat hostile....I am friendly;"
"I am anxious, depressed with life....I am easygoing;" "I am a lover....
I am cold-natured." On the other hand, each of us has many selves.
We present ourselves differently at job interviews, professional meetings,
social gatherings, confrontations in which we maintain a stance for a

specific purpose. W.H. Auden expressed it: "The image of myself
which I try to create in my own mind in order that I may love myself
is very different from the image which I try to create in the minds
of others in order that they may love me."

TST SCORING

Three judges (1) independently scored the TSTs according to the
McPartland protocols - (A) Physical, (B) Social, (C) Reflective, (D) Oceanic.
In addition, they scored the self-concept, independence, and integration
expressions in the statements as positive, neutral, or negative.
The panelists had difficulty in scoring the Twenty Statements as to
the A,B,C or D McPartland categories because many appeared to fall
into both the (A) Physical and (B) Social identifications, some into
(C) Reflective and (D) Oceanic, and in some instances, all four categories,
approaching what Zurcher (1977) characterized as "the mutable self."

Four, or 5% of the 73 respondents classified themselves as
(A) Physical mode (rigid, turned inward, narrowly-based); 28 or 38%
as (B) Social (identification with a social structure, organization,
profession); 24 or 33% as (C) Reflective (assessing self in society,
somewhat apart from social roles, trying to resolve unsettled conditions,
evaluating); 3 or 4% as (D) Oceanic (removed from social networks,
spiritually aware).

In addition to the McPartland guidelines for scoring, the panelists
judged self-concept, independence, and integration on the basis of
the reported experiences of the subjects. Self-concept was ranked
positive, neutral, or negative on evidence of self-confidence (or
self-doubt), ambition, type of job, evidence of fear, courage, attitude
toward self and others.

Independence was measured as positive, neutral or negative by
statements revealing initiative ("I volunteer for the Crisis Service
Association"); competence, suggested by type of job, particularly
in a competitive field such as law; family responsibility ("I am a
mother with two children); mobility; problem-solving; and decision-making.

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(1) Amanda Hall Ph.D., Debbie Gilden, Ph.D., and the writer.

In judging the degree of integration, ratings of positive, neutral, or negative were based on affiliations, diversity of interests, reference to participation in community affairs, and other involvement in public issues.

Two of the three panelists' agreement in grading was considered evidence of reliability. On the McPartland test portion, there was agreement on 81% of the scores. On self-concept, the agreement was 93%, on independence it was 100%, and on integration, there was 95% agreement.

TABLE I.

Category Scored	Number	Percentage
(A) Physical	4	5
(B) Social	28	38
(C) Reflective	24	33
(D) Oceanic	3	4

(The remaining twelve of the 73 were variously scored.)

SELF-CONCEPT		
Positive	49	67
Negative	11	15
Neutral	8	10

(Five were divergently scored.)

INDEPENDENCE		
Positive	36	49
Negative	5	7
Neutral	32	43

(No disagreements.)

INTEGRATION		
Positive	9	12
Negative	9	12
Neutral	51	69

(Four were scored variously.)

SCORING RESULTS OF TST

On the McPartland protocols - (A) Physical, (B) Social, (C) Reflective, (D) Oceanic (see chapter 3 for descriptions):

| | agree - 59 (81%)
| | disagree - 14

| Self-concept | agree - 68 (93%) |
| | disagree - 5 |

| Independence | agree - 73 (100%) |
| | disagree - 0 |

| Integration | agree - 69 (95%) |
| | disagree - 4 |

The extremely high percentage of agreement in the scoring would suggest that the scoring procedure was reliable.

CODES FOR COMPUTER PRINTOUT ABBREVIATIONS

SC - Refers to Self-Concept

SC1 - Early childhood experience
SC2 - Education
SC3 - Vocational experience
SC4 - Social interaction
SC5 - Social conformity
SC6 - Attitude toward handicap

IND - Refers to Independence

IND1 - Present experience
IND2 - Childhood experience
IND3 - Education
IND4 - Mobility
IND5 - Activities of daily living
IND6 - Social interaction
IND7 - Social conformity
IND8 - Vocational experience

INT - Refers to Integration

INT1 - Social Interaction
INT2 - Diversity of interests

The Kendall's Tau was used to measure the degree of association between the personal and social characteristics of the subjects and their positive, neutral, or negative scores of self-concept, independence, and integration. When tested for significance at the .05 level, the associated characteristics presented in Table II. were found to be different from zero, indicating that there was a relationship between the characteristics.

Expected results are those which confirm the stipulated hypotheses on the basis of experience and literature references. Unexpected results are those which show relationships one would not expect to exist on the basis of experience as well as facts reported in the literature. This table reveals not only a positive relationship between self-concept, independence, and integration, but significant inter-relationships between various modalities within each category.

TABLE II.

Expected Results

Kendall's Tau for associated personal and social characteristics and self-concept.

Related Variables	Tau b	p Less Than
SC1 with SC4	.345	.002
SC2 with IND6	.19	.05
SC3 with SC6	.21	.05
SC3 with IND5	.22	.05
SC3 with IND6	.27	.02
SC3 with IND8	.275	.02
SC4 with IND5	.22	.03
SC4 with INT1	.31	.003
SC5 with IND6	.235	.02
SC6 with IND2	.18	.05
IND1 with IND3	.197	.03
IND1 with IND5	.35	.001
IND2 with IND3	.35	.0005
IND2 with IND5	.22	.03
IND2 with INT2	.2699	.006
IND3 with IND5	.38	.0003
IND5 with IND8	.25	.02

Unexpected Results

Related Variables	Tau b	p Less Than
SC3 with INT2	.25	.02
SC5 with IND4	.247	.02
SC5 with IND5	.21	.05
SC5 with INT2	.30	.003
IND5 with INT2	.266	.01

Except in a few instances, the results of the Kendall's Tau test appeared logical, and therefore, to be expected. In view of the pervasive influence of self-concept on the ways in which the individual experiences life, it is not surprising to find significant relationships and inter-relationships between the variables under this rubric and those under Independence and Integration. The effects of Childhood Experiences (SC6 with IND2), for example, are well documented in the literature. Thus we would expect their important bearing on Social Interaction (SC1 with SC4), on Education (IND2 with IND3), on Activities of Daily Living (IND2 with IND5), and on Diversity of Interests (IND2 with INT2).

The improved self-confidence, more positive self-image, and broader perspective to be gained from education would suggest significant relationships between Education (SC2) and Social Interactions (IND6), as well as Vocational Experience (SC3), and Social Interaction (IND6).

Also anticipated would be commonality of characteristics as found between Vocational Experience (SC3) and Attitude Toward Handicap (SC6) and with Vocational Experience in the context of self-reliance (IND8). The characteristic self-reliance is common to both Vocational Experience (SC3) and Activities of Daily Living (IND5). Their significant relationship would therefore be expected. The Kendall's Tau result is consistent in the relationship of IND5 (Activities of Daily Living) with IND8 (Vocational Experience). Connections between Social Interaction (SC4) and interpersonal involvement in the Skills of Daily Living (IND5) are also to be expected, as is the connection between Social Interaction (SC4) and Social Interaction in the context of Integration (INT1). Obviously, a relationship exists between Social Conformity (SC5) and Social Interaction (IND6), since observation of social convention generally facilitates social acceptance.

Not surprising either are the significant relationships found between Present Experience (IND1), referring to present living arrangement, with roommate or spouse, and Education (IND3), and also with Activities of Daily Living (IND5).

Unexpected however, was the significant Tau relationship between Social Conformity (SC5) and Mobility (IND4), for it is conceivable that an individual could be independently mobile, yet non-conformist with respect to social convention. On the other hand, it might be argued that the individual conforming to what society expects of him or her socially would feel obliged to acquire the ability to travel about independently.

Similarly, the relationship of Social Conformity (SC5) with the Activities of Daily Living (IND5) was unexpected inasmuch as an individual might be independent in daily living skills, yet unconventional in his social life. The relationship between Activities of Daily Living (IND5) and Diversity of Interests (INT2) would appear to be a possibility rather than a probability. Neither SC3, Vocational Experience, nor SC5, Social Conformity, would appear to have commonality with Diversity of Interest, INT2, and therefore their significant relationship falls into the unexpected column.

V.   CONCLUSIONS AND RECOMMENDATIONS

Clearly, the majority of the 74 respondents whose life styles have been examined in the foregoing pages were above average in independence, opportunities for extensive education, and for mingling and competing with seeing people.   They have been seen moving away from specialized agencies for the blind, from stereotyped kinds of employment, relying on themselves for the solutions to their problems, showing autonomy in the management of their lives.   Most of the respondents seemed to have accepted their blindness, to have even been challenged by it, and to have found identity through their work, relationships, service, religious faith, art, or simply through a zest for living.

The four questions originally posed in this study were:

1.   What are the dominant modes of self-perception of the subjects?
2.   To what extent are the subjects independent?
3.   To what extent are the subjects integrated?
4.   What are the relationships between the subjects' self-perception, independence, and integration?

SELF-CONCEPT

Both the questionnaire and the TST revealed a preponderantly positive self-image among the subjects.   According to the questionnaire, 65 (87.8%) considered their health good; 50 (67.6%) considered their sense of direction good; 66 (89.2%) reported their coordination good; 31 (41.9%) regarded their blindness as a challenge.

With respect to self-identifying modes, 28 or 38% of the TST respondents classified themselves as (B) Social, 24 or 33% as (C) Reflective. Referring to the distribution of the A,B,C,D modes in his book, The Mutable Self, Louis Zurcher (1977) states: "The B mode has been reported to be the dominant self-concept mode among members of the American society... More recently, however, it is evident that the C mode, Reflective, is becoming more commonplace and dominant because the social basis of the B mode self is now less stable" (page 44).   He points out that the C mode self, usually more uncomfortable, tentative, self-assessing, uncertain, is characteristic of times of rapid social change.

One might expect that an intelligent group of blind individuals,
responding to the pressure points in our society, might also fall into
the C mode. It may be, however, that the status implicit in the B mode,
the support and fulfillment available through identification with a
social network, a club, a group, an organization, a cause, may explain
the adherence by the blind to the B mode. One might also speculate that
the blind are not yet so integrated that they are ready to risk the
fluidity and autonomy associated with the C mode.

INDEPENDENCE

According to both the questionnaire and the TST, the subjects
possessed a high degree of independence. Almost all were independently
mobile - 58 (78.4%) used the cane; 12 (16.2%) used a guide dog. In the
area of jobs, only 13 (17.6%) were unemployed. Thirty (40.5%) found
their own jobs. Concerning daily living skills, 55 (74.3%) cooked for
themselves; 40 (54.1%) did their own cleaning; 64 (86.5%) did not require
help in grooming; 54 (73%) selected their own wardrobe; 66 (89.2%)
required no assistance at meals. Forty-nine (66.2%) reported that they
took the initiative in making friends. Thirty-six (50%) of the respondents
scored positive on independence in the TST.

INTEGRATION

The questionnaire responses showed that most of the subjects had
had associations with sighted people in some phase of their lives.
61 (82.4%) reported that they had made friends with seeing students; 50
(67.6%) attended day classes in grade school with seeing students; 53
(71.6%) attended classes in high school with seeing students; 52 (70.3%)
belonged to organizations for seeing people; 58 (78.4%) took vacations
with seeing people; and 26 (35.1%) reported that none of their best
friends was blind.

The TST yielded markedly contrasting results in the integration
scores. Again, it may be important to note the caveat that the basis of
the data is self-report (a limitation of the survey method), allowing for
the possibility that the respondents aligned their replies on the side
of integration, the main thrust of the questionnaire. The panelists
scored only nine of the 73 TSTs as high (positive). Fifty-one were
scored as neutral (meaning that nothing in the statements referred to

participation with seeing people). Four TSTs were variously scored.
There are two possible explanations for this result – first, that the
TST is not an effective measurement of judging integration of blind
persons, and second, that the subjects of this study thought of themselves
as "blind persons" rather than as individuals who are blind, and therefore
centered their responses on experiences, attitudes, and feelings related
to their blindness rather than to their life styles.

Responses in both the questionnaire and the TST confirmed the
attitudinal and social problems of blind people as they reach out to
take their places alongside their fellow men. Thirty-eight or 50% reported
that they felt discriminated against because of their handicap; 21 or
28% were often lonely; 30 or 40.5% felt self-conscious in a group; 17 or
23% regarded their blindness as a cause of isolation. Lack of understanding
or actual rejection in the home as well as demeaning public attitudes
appeared again and again in the TSTs as a source of frustration, anger,
and depression.

Contributing to the derogating attitudes on the part of the public
are the restrictions implicit in the very nature of blindness, with it's
psychological implications – mobility in unfamiliar environments, the
inability to return a glance or smile, the absence among the majority of
the blind of the usual use of gestures (48 or 64.9% replied "no" to the
question "Do you use gestures?"), and body language in general. These,
among other psychological factors earlier alluded to, cause discomfort
for most sighted people on the first encounter, and represent social
deterrants for the blind person.

To help overcome such barriers a two-pronged approach is recommended –
one involving training, the other public education. Greater prominence
should be given to socialization in the training phases of rehabilitation,
recreation, and education of congenitally blind persons. Instruction
should include grooming, posture, body language (training in the non-
verbal patterns of communication normal to sighted people), dramatics
(supported by American Foundation for the Blind research in the 40s),
dance, rhythmic games, social graces, etiquette, and techniques of
relaxation.

Equally important to ease social acceptance is intensified public
education, not only through the consciousness-raising stories currently

featured on radio and television, but also programs targeted toward those significant others who will influence the lives of most blind people, namely parents, teachers, fellow students, employers and employees, and the medical profession.

Often the first knowledge for parents that they have an incurably blind child comes from doctors or nurses. Notoriously absent from their training are guidelines on how to convey this verdict, or information on where the parents may find financial help, adaptive aids, library services, psychological consultation, etc.

During the years of the retrolental fibroplasia epidemic (1945-1954), parents across the country formed groups to discuss problems and solutions in the rearing of their incurably blind children. With the subsequent shift from residential to day classes as the primary means of education for blind children, most parent groups disbanded. Now, with the resurgence of RLF, and a continuing incidence of multi-handicapped blind children, support and education of parents is critically necessary if their blind children are to realize their potential for leading useful and gratifying lives.

There is a critical need for an intensification of work with blind children of pre-school age. The blind subjects in this study, along with scientific findings and abundant documentation in the literature, confirmed the importance of childhood experiences in influencing the social and psychological direction of their lives. Yet, the fact is that many states have no services for pre-school blind children, and those that do have insufficient services.

The passage of PL 94-142, mainstreaming legislation alluded to earlier, makes schools responsible for the development of Individual Education Plans, to include therapies where necessary, independent living skills, and in fact, anything else needed for a well-rounded education. Along with resource teachers, the classroom teacher will now need increased understanding of the special problems of all handicapped children.

Although the majority of blind people today do indeed attend school with seeing children, the extent to which so-called "integrated" education has drawn them into the mainstream has as yet not been determined. Obviously, physical proximity in the classroom has not accomplished

integration for blacks, and it is safe to say it cannot accomplish it for the minority with which we are here concerned.

Should not education play a more effective role in improving society's attitudes toward it's handicapped members? Is this not a valid responsibility, particularly in working with children and youth when their social world is expanding, when consciousness is formed and seeds can be planted that will insure more constructive social interaction with persons who suffer from one or another kind of impairment? Surely the time has come for the implementation, evaluation, and dissemination of educational curricula and materials that will assist elementary and high school students to develop knowledge, skills, and attitudes that will enhance the mutual acceptance of disabled and non-disabled students in classrooms, in play, and in other social experiences. To increase understanding, promote friendship, make both seeing and blind students feel comfortable together, social studies, for example, should actually incorporate units that will present the adaptations that blindness requires in a meaningful, constructive way.

To counteract the deficiencies which also hamper blind children, public schools must find ways of including basic physical training for them. Vigorous physical activity is taken for granted as important to the health and well-being of sighted children. Such activity is even more important to blind children because the average blind child lacks both motivation and opportunity for free, varied movement. Blind children are excluded from the average sports programs - baseball, basketball, and football. As indicated in the literature previously cited, without opportunity to develop physical stamina, vitality, and good posture, blind children manifest lack of self-confidence and poor self-image, both subject to social evaluation.

Nevertheless, when we take the long view of society's changes in attitude toward the blind, from rejection to wardship, and finally to membership, one cannot fail to be impressed with the enormous progress in the status of the blind, particularly in the second half of the twentieth century, surpassing that of the previous millenium. Frances Koestler (1975) writes: "We see the common spectacle of the blind walking down the street, in public conveyances, working at jobs, managing households, participating with neighbors in recreational pursuits,

fulfilling their roles as citizens in political movements and communal activities" (page 460). One could add that we see these once-considered aberrations of the human species raising families, inventing, healing, storming City Hall to demand their civil rights, running marathons alongside seeing competitors, skiing, sky-diving.

The picture today forms quite a contrast to that painted by Himes (1951) as "a cautious, timid man, with the cards stacked against him, at the outset, and whipped daily by a world of seeing people. He has retired from the struggle and surrendered to useless dependency" (page 15).

The question still remains, to what extent does integration depend on external factors, such as constructive public policy and the electronic revolution, and to what extent is it the result of genetic and experiential characteristics of the individual. "We are living," wrote Rollo May (1975) "at a time when one age is dying and a new age is not yet born" (page 11). In an age of transition, variously characterized as alienated, self-oriented, computerized, with a tug-of-war between traditional and contemporary values, what is the impact on the average blind person's life style? Gone obviously, is the era, long-lamented in the literature, when the blind (as a group) merely reflected public stereotypes. Through training, as yet mainly academic and vocational, the blind have managed to shake off the shackles of passivity and dependence, and, to some extent, segregation.

Inasmuch as it does not represent a cross-section of the blind population, the sample in this study precludes claims of generalization. It reveals, however, the direct insights available in the backgrounds, the thoughts, the feelings, the life experiences, of blind people themselves. In them, we discern a quest for a more confident social presence among the seeing, a more authentic acceptance as equals in school, at work, in recreation, and in other interactive situations. The subjects' statements also indicate direction for further research. There is a great need to find an effective methodology and appropriate instrumentation for studying the diverse issues around integration. It will also be useful to more specifically identify the extent and ways in which public attitudes toward the blind have changed in recent decades.

The study suggests to organizations established to help the blind, an intensified effort, through their publicity, to break stereotypes, and, through their programming, to help blind people acquire the positive self-image and adequate degree of independence necessary to move out of the segregated environment into the mainstream. It suggests to parents, teachers, counselors in public and private agencies, and to health and recreation professionals, a greater emphasis on socialization, with all the physical, non-verbal and other adaptive behaviors that most blind people must be taught.

In summary, the findings of the study are:

1. Both the questionnaire and the Twenty Statements Test used in the survey show a predominantly positive self-image among the participants.

2. According to both the questionnaire and the TST, the participants showed a high degree of independence.

3. As measured by the data derived from the questionnaire, the participants showed a high degree of integration. However, according to the TST, only nine participants were rated positive on integration. The scoring of the Twenty Statements Tests, according to the McPartland protocols, (A) Physical, (B) Social, (C) Reflective, and (D) Oceanic, showed that 28 or 38% of the participants classified themselves as (B) Social, 24 or 33% as (C) Reflective, 4 or 5% as (A) Physical, and 3 or 4% as (D) Oceanic.

4. According to the Kendall's Tau, tested at the .05 level of significance, the self-concept and independence of the participants, as reflected in their personal and social characteristics, related significantly to their integration into community life. Childhood experience related significantly to attitude toward handicap, social interaction, education, and diversity of interests; education and vocational experience to social interaction; vocational experience to attitude toward handicap and activities of daily living; social conformity and social interaction to present experience and activities of daily living.

Unexpected significance in relationships was found by the Tau between social conformity and mobility, social conformity and activities of daily living, social conformity and diversity of interests, and between vocational experience and diversity of interests.

The literature reviewed and the findings of the study suggest the following recommendations:

1. Organizations for the blind should adopt policies and design programs that would not only help blind people to develop a positive self-image and acquire independence, but also that would break stereotypes and actually enable their clients to move out of the sheltered environment into the seeing world.

2. Programs in education, rehabilitation and recreation should include training in posture, body language, and freedom of movement, aspects of socialization not automatically acquired by the congenitally blind.

3. To fill a critical need, the United States Department of Education should establish and fund services for blind children of pre-school age.

4. Practical and educational information should be systematically channeled to such key people in the lives of the blind as parents, teachers, students, doctors, nurses, employers, and employees.

5. In schools where blind students are unable, because of their handicap, to participate in physical education programs, substitute classes should be scheduled to fill the need for such training.

6. Units of study designed to enhance mutual acceptance of handicapped and non-handicapped students should be incorporated in school curricula.

7. Further research should be undertaken along the lines of this study to determine the most effective methods of studying the issues around integration of blind persons into society and how it can best be achieved.

In an area as yet so unexamined, this study is exploratory. It may be that only the individual with his or her unique assimilation of training and experience can accomplish integration for him or herself. On the other hand, the study may reveal that certain opportunities, designed to improve self-image, body comportment, and socialization, can open gateways to the seeing world. This is a time when the minorities of the world are clamoring for admission to the human family. The blind are one of these minorities. It is hoped that this study will shed some light on how to make this a reality.

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APPENDIX A

FACTORS AFFECTING INTEGRATION OF BLIND PERSONS
APPENDIX H (handwritten)

Absolute Frequency (handwritten)
Relative Frequency (handwritten)

QUESTIONNAIRE

Please answer this questionnaire as you sincerely believe, not as you consider it socially more acceptable. There are no correct or incorrect answers. It is not necessary to sign this questionnaire. ❋ _IN INSTANCES WHERE total is less than 74, RESPONDENTS FAILED TO ANSWER ALL QUESTIONS._

> Please indicate answer by writing the appropriate code number in the space provided.

		%
AGE		
1 – 21 thru 35	48	64.9
2 – 36 thru 50	12	16.2
3 – Over 50	14	18.9
SEX		
1 – Male	27	36.5
2 – Female	47	63.5
DEGREE OF VISION		
1 – Light	52	70.3
2 – Obstacle	12	16.2
ONSET OF BLINDNESS		
1 – Birth	53	71.6
2 – Early Childhood	21	28.4
MARITAL STATUS		
1 – Single	35	47.3
2 – Married	31	41.9
3 – Divorced	3	4.1
4 – Living together	2	2.7
5 – Widowed	3	4.1
MY SPOUSE IS		
1 – Blind	13	17.6
2 – Sighted	22	29.7
NUMBER OF CHILDREN		
1 – One	4	5.4
2 – Two	8	10.8
3 – Three	3	4.1
4 – Four or more	2	2.7
5 – None	37	50
NUMBER OF BROTHERS AND SISTERS		
1 – One	19	25.7
2 – Two	18	24.3
3 – Three	8	10.8
4 – Four or more	16	21.6
5 – None	11	14.9

		%
LIVING ARRANGEMENT (13)		
1 – With family	37	50
2 – Alone	23	31.1
3 – With blind roommate	2	2.7
4 – With sighted roommate	10	13.5
5 – Both	2	2.7
REGION IN WHICH I LIVE (14)		
1 – Northeast	14	18.9
2 – Southeast	12	16.2
3 – Midwest	12	16.3
4 – Southwest	4	5.4
5 – Northwest	5	6.8
6 – West Coast	26	35.1
COMMUNITY IN WHICH I LIVE (15)		
1 – Large city (250,000	36	48.6
2 – Small City	21	28.4
3 – Suburb	14	18.9
4 – Rural	2	2.7

EARLY CHILDHOOD EXPERIENCES

		%
I FELT ALONE AND REJECTED (16)		
1 – Yes	18	24.3
2 – No	56	75.7
I FELT ONE OF THE FAMILY (17)		
1 – Yes	61	82.4
2 – No	13	17.6
MY EARLY CHILDHOOD ACTIVITIES WERE SPENT (18)		
1 – Playing with others	59	79.7
2 – Playing alone	12	16.2
MY PLAYMATES WERE NEIGHBORS (19)		
1 – Yes	53	71.6
2 – No	17	23
I ATTENDED PRE-SCHOOL WITH (20)		
1 – Seeing children	30	40.5
2 – Blind children	20	27

EDUCATION | %

HIGHEST GRADE ACHIEVED
1 - Grade school or less | 0 | 0
2 - Some High School | 1 | 1.4
3 - High School diploma or equivalent | 11 | 14.9
4 - Some college | 15 | 20.3
5 - College degree | 20 | 27
6 - Graduate School or professional degree | 27 | 36.5

SPECIFY ANY SPECIAL TRAINING
1 - Arts and Crafts | 0 | 0
2 - Music | 10 | 13.5
3 - Vocational | 15 | 20.3
4 - Speech | 1 | 1.4
5 - Other | 11 | 14.9

ATTENDED DAY SCHOOL

GRADE SCHOOL
1 - Yes | 50 | 67.6
2 - No | 22 | 29.7

HIGH SCHOOL
1 - Yes | 53 | 71.6
2 - No | 20 | 27

ATTENDED RESIDENTIAL SCHOOL

GRADE SCHOOL
1 - Yes | 40 | 54.1
2 - No | 31 | 41.9

HIGH SCHOOL
1 - Yes | 38 | 51.4
2 - No | 33 | 44.6

I PARTICIPATED IN CLUBS AND SCHOOL ACTIVITIES
1 - Yes | 66 | 89.2
2 - No | 8 | 10.8

I MADE FRIENDS WITH SEEING STUDENTS
1 - Yes | 61 | 82.4
2 - No | 12 | 16.2

I FELT ISOLATED FROM OTHER STUDENTS
1 - Yes | 28 | 37.8
2 - No | 45 | 60.8

I HAD OPPORTUNITIES FOR DATING
1 - Always | 10 | 13.5
2 - Often | 16 | 21.6
3 - Rarely | 28 | 37.8
4 - Never | 19 | 25.7

MOBILITY | %

[31] I USE A WHITE CANE
1 - Yes | 58 | 78.4
2 - No | 15 | 20.3

[32] I USE A GUIDE DOG
1 - Yes | 12 | 16.2
2 - No | 61 | 82.4

VOCATIONAL EXPERIENCES

[33] WHAT IS YOUR OCCUPATION?
1 - Social Worker | 4 | 5.4
2 - Secretary | 2 | 2.7
3 - Mechanic | 0 | 0
4 - Computer Programmer | 3 | 4.1
5 - X-Ray Technician | 0 | 0
6 - Dictaphone Transcriber | 4 | 5.4
7 - Concession Operator | 3 | 4.1
8 - Unemployed | 13 | 17.6
9 - Other (Specify) _____ | 44 | 59.5

[34] HOW OCCUPATION OBTAINED
1 - Thru Dept. of Rehabilitation | 17 | 23
2 - Other Agency | 0 | 0
3 - School | 4 | 5.4
4 - Friend | 7 | 9.5
5 - Self Obtained | 30 | 40.5

[35] I FEEL ACCEPTED ON THE JOB
1 - Yes | 52 | 70.3
2 - No | 7 | 9.5

[36] I PARTICIPATE WITH COLLEAGUES IN ACTIVITIES, SUCH AS COFFEE BREAKS, LUNCH, OR SPECIAL EVENTS
1 - Yes | 52 | 70.3
2 - No | 7 | 9.5

[37] THE PEOPLE I WORK WITH ARE
1 - Friendly | 54 | 73
2 - Distant | 5 | 6.8

[38] I HAVE AS EQUAL A CHANCE FOR PROMOTION AS THE OTHER WORKERS
1 - Yes | 38 | 51.4
2 - No | 19 | 25.7

[39] WHAT I LIKE BEST ABOUT MY JOB IS
1 - Salary | 10 | 13.5
2 - Doing something worthwhile | 27 | 36.5
3 - Feeling accepted | 5 | 6.8
4 - Chance of promotion | 1 | 1.4
5 - Recognition | 6 | 8.1

2

I FEEL DISCRIMINATED AGAINST BECAUSE OF		%
SEX		
1 - Yes	8	10.8
2 - No	60	81.1
RACE		
1 - Yes	1	1.4
2 - No	67	90.5
ETHNIC ORIGIN		
1 - Yes	2	2.7
2 - No	66	89.2
RELIGION		
1 - Yes	3	4.1
2 - No	65	87.8
AGE		
1 - Yes	2	2.7
2 - No	66	89.2
PHYSICAL HANDICAP		
1 - Yes	38	51.4
2 - No	31	41.9

ACTIVITIES OF DAILY LIVING

I DO MY OWN COOKING		
1 - Alone	55	74.3
2 - With help	13	17.6
I DO MY OWN SHOPPING		
1 - Alone	14	18.9
2 - With help	55	74.3
I DO MY OWN CLEANING		
1 - Alone	40	54.1
2 - With help	28	37.8
I DO MY OWN GROOMING		
1 - Alone	64	86.5
2 - With help	9	12.2
I AM CAREFUL ABOUT CLEANLINESS AND NEATNESS		
1 - Always	49	66.2
2 - Often	25	33.8
3 - Rarely	0	0
4 - Never	0	0
I SELECT MY OWN WARDROBE		
1 - Yes	54	73
2 - No	20	27
I HAVE HELP IN MAINTAINING MY WARDROBE		
1 - Yes	56	75.7
2 - No	18	24.3

SOCIAL INTERACTION			%
[53]	MY FRIENDS ARE PRIMARILY		
	1 - Sighted	28	37.8
	2 - Blind	7	9.5
	3 - Some of each	39	52.7
[54]	WITH SEEING PEOPLE, I FEEL		
	1 - Self-conscious	12	16.2
	2 - Tense	3	4.1
	3 - On guard	10	13.5
	4 - Relaxed	49	66.2
[55]	OF YOUR THREE BEST FRIENDS, HOW MANY ARE BLIND		
	1 - One	25	33.8
	2 - Two	15	20.3
	3 - Three	7	9.5
	4 - None	26	35.1
[56]	WITHIN THE PAST MONTH, I HAVE ASKED A FRIEND TO DO SOMETHING FOR ME		
	1 - Yes	63	85.1
	2 - No	10	13.5
[57]	WITHIN THE PAST MONTH, A FRIEND HAS ASKED ME TO DO SOMETHING FOR HIM OR HER		
	1 - Yes	55	74.3
	2 - No	18	24.3
[58]	I FEEL LONELY		
	1 - Always	2	2.7
	2 - Often	21	28.4
	3 - Rarely	45	60.8
	4 Never	6	8.1
[59]	I MAKE FRIENDS EASILY		
	1 - Yes	55	74.3
	2 - No	19	25.7
[60]	I TAKE THE INITIATIVE IN MEETING PEOPLE		
	1 - Yes	49	66.2
	2 - No	24	32.4
[61]	I ACCEPT CRITICISM		
	1 - Yes	66	89.2
	2 - No	8	10.8
[62]	I ENJOY TEAMWORK		
	1 - Yes	64	86.5
	2 - No	9	12.2
[63]	I ADAPT TO NEW SITUATION		
	1 - Yes	67	90.5
	2 - No	7	9.5

I AM SELF-CONSCIOUS IN A GROUP		%
1 – Yes	30	40.5
2 – No	44	59.5

I HAVE RESPONSIBILITY IN COMMU-NITY AFFAIRS

1 – Yes	40	54.1
2 – No	34	45.9

I AM SENSITIVE WITH REFERENCE TO MY HANDICAP

1 – Yes	11	14.9
2 – No	62	83.8

I RESENT THE PUBLIC STEREOTYPED ATTITUDES

1 – Yes	60	81.1
2 – No	14	18.9

I AM INCLINED TO REFUSE OFFERS FOR HELP

1 – Yes	22	29.7
2 – No	52	70.3

I USE GESTURES FREELY

1 – Yes	25	33.8
2 – No	48	64.9

I TAKE VACATIONS WITH MY FAMILY

1 – Yes	46	62.2
2 – No	27	36.5

I TAKE VACATIONS WITH BLIND PEOPLE

1 – Yes	24	32.4
2 – No	50	67.6

I TAKE VACATIONS WITH SEEING PEOPLE

1 – Yes	58	78.4
2 – No	15	20.3

I BELONG TO ORGANIZATIONS FOR THE BLIND

1 – Yes	39	52.7
2 – No	35	47.3

I BELONG TO ORGANIZATIONS FOR SEEING PEOPLE

1 – Yes	52	70.3
2 – No	22	29.7

SOCIAL CONFORMITY

I ENJOY DRESSING IN THE CURRENT VOGUE

1 – Yes	48	64.9
2 – No	26	35.1

(76) I REQUIRE HELP AT MEALS

		%
1 – Yes	8	10.8
2 – No	66	89.2

(77) I ENJOY BEING PUNCTUAL

1 – Yes	69	93.2
2 – No	5	6.8

PHYSICAL SKILLS

(78) MY POSTURE

1 – Good	45	60.8
2 – Fair	28	37.8
3 – Poor	1	1.4

(79) MY HEALTH

1 – Good	65	87.8
2 – Fair	9	12.2
3 – Poor	0	0

(80) MY SENSE OF DIRECTION

1 – Good	50	67.6
2 – Fair	20	27
3 – Poor	4	5.4

ID _____ (1-3)
CC __2__ (4)

(5) MY MUSCULAR COORDINATION

1 – Good	66	89.2
2 – Fair	8	10.8
3 – Poor	0	0

(6) I GET EXERCISE

1 – Much	15	20.3
2 – Some	55	74.3
3 – None	4	5.4

DIVERSITY OF INTERESTS

I PARTICIPATE IN THE FOLLOWING

(7) SWIMMING

1 – Yes	43	58.1
2 – No	31	41.9

(8) FISHING

1 – Yes	16	21.6
2 – No	57	77

(9) BOATING

1 – Yes	26	35.1
2 – No	47	63.5

(10) SKATING

1 – Yes	15	20.3
2 – No	58	78.4

(11) SKIING

1 – Yes	10	13.5
2 – No	63	85.1

		%
HIKING		
1 – Yes	39	52.7
2 – No	34	45.9
BOWLING		
1 – Yes	18	24.3
2 – No	56	75.7
DANCING		
1 – Yes	34	45.9
2 – No	40	54.1
BICYCLING		
1 – Yes	30	40.5
2 – No	44	59.5
CRAFTS		
1 – Yes	25	33.8
2 – No	49	66.2
AMATEUR RADIO		
1 – Yes	11	14.9
2 – No	63	85.1
TABLE GAMES		
1 – Yes	44	59.5
2 – No	30	40.5
I GO TO THE THEATRE		
1 – Yes	57	77
2 – No	17	23
I GO TO CONCERTS		
1 – Yes	59	79.7
2 – No	15	20.3
I PLAY AN INSTRUMENT		
1 – Yes	44	59.5
2 – No	30	40.5
I SING SOLO OR IN A CHORUS		
1 – Yes	28	37.8
2 – No	46	62.2
I WRITE POEMS OR STORIES		
1 – Yes	28	37.8
2 – No	46	62.2
I ATTEND SCULPTURE EXHIBITS		
1 – Yes	28	37.8
2 – No	46	62.2

PLEASE USE FOLLOWING CODE WHEN ANSWERING NEXT SERIES OF QUESTIONS:

1 – Always
2 – Often
3 – Rarely
4 – Never

ATTITUDE TOWARD HANDICAP

	ALWAYS	%	OFTEN	%	RARELY	%	NEVER	%
IT IS A BURDEN								
[25]	3	4.1	12	16.2	43	58.1	16	21.6
IT IS AN INCONVENIENCE								
[26]	9	12.2	39	52.7	24	32.4	2	2.7
IT RESULTS IN ISOLATION								
[27]	4	5.4	17	23	32	43.2	19	25.7
IT IS A CHALLENGE								
[28]	31	41.9	32	43.2	4	5.4	6	8.1
IT IS A DISADVANTAGE								
[29]	9	12.2	29	39.2	33	44.6	2	2.7
IT HAS ADVANTAGES								
[30]	2	2.7	24	32.4	34	45.9	14	18.9
IT IS PAINFUL								
[31]	1	1.4	11	14.9	21	28.4	41	55.4
IT IS A SOURCE OF EMBARRASSMENT								
[32]	2	2.7	8	10.8	31	41.9	33	44.6
IT IS A SOURCE OF FRUSTRATION								
[33]	2	2.7	32	43.2	35	47.3	5	6.8

		%
[34] **IT IS THE WORST THING THAT COULD EVER HAPPEN TO ANYONE**		
1 – Yes	5	6.8
2 – No	63	85.1

[35] **I ATTRIBUTE MY ASSOCIATIONS WITH PREDOMINANTLY BLIND OR PREDOMINANTLY SIGHTED PEOPLE TO**

1 – Attitudes in early childhood	12	16.2
2 – Training	2	2.7
3 – Education	6	8.1
4 – Skills	4	5.4
5 – Self-concept	14	18.9
6 – Other (specify)	33	44.6

In the 20 blanks below, please make 20 different statements in response to the question - Who am I? Answer as though you were giving these answers only to yourself, no one else. Write your answers in the order they occur to you. Go along fairly fast. Don't worry about logic or importance.

1. _____

2. _____

3. _____

4. _____

5. _____

6. _____

7. _____

8. _____

9. _____

10. _____

11. _____

12. _____

13. _____

14. _____

15. _____

16. _____

17. _____

18. _____

19. _____

20. _____

PLEASE RETURN THIS QUESTIONNAIRE TO: Rose Resnick
                                       Executive Director
                                       California League for the Handicapped
                                       1299 Bush Street
                                       San Francisco, CA 94109

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APPENDIX B

California League for the Handicapped, Inc.

1299 Bush Street, San Francisco, CA 94109 • (415) 441-1980

Independence for the blind and handicapped

October 22, 1979

Dear Participant:

Thank you very much for your contribution to the Integration Study.
I appreciate it more than I can tell you.

Would those of you who have as yet not returned the twenty statements
answering the question, "Who am I?" kindly get them to me as soon as
possible?

I shall be happy to supply a brief synopsis of the results of the
study to those interested.

Again, many thanks.

Rose Resnick
Executive Director

California League for the Handicapped, Inc.

1299 Bush Street, San Francisco, CA 94109 • (415) 441-1980

Independence for the blind and handicapped

September 4, 1979

Dear Participant:

By now you should have received material in connection with a doctoral study I am doing on integration of congenitally blind persons. I would appreciate very much your letting me know if it has not arrived, and, if it has, that you kindly fill it out as soon as possible. I realize these surveys can be a chore and a bore, but am hoping you will find this one interesting. I truly value your participation in this effort and hope to hear from you soon.

Again, thank you very much.

Rose Resnick
Executive Director

California League for the Handicapped, Inc.

1299 Bush Street, San Francisco, CA 94109 • (415) 441-1980

Independence for the blind and handicapped

May 7, 1979

Dear Participant:

Thank you very much for your willingness to participate in the Integration
Study. Please fill out both the questionnaire and, on the blank sheet
titled Twenty Statements Test, your answers to the question,"Who am I?".
Answer this as you would answer to yourself, not taking time for long
thinking about each statement.

In answering the questionnaire, please type or Braille your answers
on a separate sheet, or have someone fill in your answers on the enclosed
print copy.

The information you provide is completely confidential. Participants
are anonymous in the study, so please do NOT sign any of the returns.

I deeply appreciate your help in this project. Again, many, many
thanks.

Looking forward to hearing from you.

Rose Resnick
Executive Director